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Wm A Alcott

THE

MOTHER'S

MEDICAL GUIDE

IN

CHILDREN'S DISEASES.

BY WILLIAM A. ALCOTT,

Author of "The Young Man's Guide," "The Young Woman's Guide," "The House I live in," &c. &c.

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PREFACE.

The object of the following volume is not to encourage dosing and drugging, or extend quackery; but to discourage both. It is not to lead mothers to do *more* than now, but *less;* and to do whatever they do more intelligently, promptly, and efficiently. It is not to encourage the study of books on the *nature of disease*, but the laws and relations, rather, of the human constitution. It is not to make parents exclusively their own physicians; but to prevent, in no small degree, the need both of physicians and medicine.

I have endeavored to describe, in a manner which, I trust, will be found adapted to the meanest capacity, the symptoms of children's diseases; and to state, with

equal plainness, their most frequent causes. Nor have I been confined, in my remarks, to diseases peculiar to children, but have treated of many others, to which, in common with adults, they are subject. I have endeavored to show the mother how far, in the management of infantile disease, she can safely go, and when she ought to call for medical advice or aid. In short, I have endeavored to mark, with sufficient distinctness, the line between the mother and the medical and surgical practitioner — a thing which, so far as I know, has not before been done, at least to any considerable extent, by any writer.

DEDHAM, *December*, 1842.

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ADDRESS TO MOTHERS.

It has been said, by President Lindsley, of the University of Nashville, that there is much "murderous quackery" abroad, even among regular-bred physicians. He takes "for granted that every half-educated physician," — and many such there are among us, — "who succeeds in getting a reputable share of practice, must have rid the world, rather prematurely, of some dozen or twenty individuals, at the least, in order to qualify himself for his profession."

Now, this assertion, strong as it is, was not made hastily. It came from a source sufficiently respectable to entitle it to consideration. And, though the facts on which President L. bases his conclusions are undoubtedly more numerous in the valley of the Mississippi than eastward of the mountains, yet even here I believe he is quite within the bounds of strict truth. I believe that, for every generation of

medical men, — extending through a term of forty years, — we send out, in the United States, some five or six thousand, each of whom succeeds "in getting a reputable" practice, — not, of course, intentionally, but in his ignorance, — by ridding the world of at least a dozen of its citizens.

This, I grant, is a serious charge; and it is not made without regret. It becomes necessary, however, in order to meet and prevent the evils to which it refers. For remember that, if the corps of half-educated physicians of our country slay 60,000 citizens every 40 years, or 150,000 every century, or 1,500 a year, it is highly probable that the army of those persons who, without being *so much* as half-educated, make, vend, or prescribe, for the sick, destroy a much greater number. And then, again, remember one thing more — that there is a class of citizens who carry a still higher hand, in the work of destruction, direct and indirect, than either of these: I mean uneducated mothers.

Let the reader reflect, for one moment, on this melancholy picture. Let her think of half a million of individuals destroyed in the United States every century, at the hands of licensed

and unlicensed ignorance and quackery. True, it is only one person a year in every 5,000 inhabitants — some 16 or 18 in a city like Boston — but this is a destruction which is quite unnecessary. I suppose, however, my estimate is quite too low; and yet, even thus low, the results are, in the aggregate, not a little startling.

These, however, are by no means all, nor the worst, results of ignorance and quackery. It is not he that *dies* by malpractice, alone, who suffers, or, indeed, who suffers most; but he who *lives* under it. The sufferings of those who die are often limited to a few weeks, sometimes to a few days; while they who survive, under the hands of ignorant interference, are not only much more numerous than those who die, but the victims of more prolonged, not to say more intense, sufferings. And, in the infliction of these prolonged sufferings, the mother, we may be sure, comes in for a pretty large share. Sometimes, moreover, she is a co-worker — a sort of companion in crime — with others. She could not dose continually with elixir, ipecacuanha wine, laudanum, worm-lozenges, calomel, picra, salts, rhubarb, cordials, pills, matchless sanatives, panaceas, and the mighty parapher-

nalia of modern quackery, if there was no one to make, vend, or sell, these two-edged instruments.

There are two or three practical errors, which have influence not only with mothers, to induce them to help on this work of destruction, but, to a very great extent, with apothecaries, and the makers and venders of most patent medicines, (sometimes, too, as there is much reason to fear, with the less intelligent sort of physicians,) but which it is highly desirable, preliminary to a work for mothers, on the diseases of children, to attempt to expose.

The first of these errors is a practical belief that diseases are *things*, or, as some would express it, *creatures*, with certain characteristics, like so many heads, horns, legs, or claws; whereas, they are merely *modes of action.*

The second error is that of attaching too much importance to the *names* of diseases. This is closely connected with — if, indeed, it is not a part of — the former error. There is a convenience, to medical men, in calling certain modes of action by certain names. Increased heat and thirst of the general system, for example, with increased action of the heart and

arteries, and other defined symptoms, are, by universal consent, called *fever;* and the name answers a tolerable purpose. But, beyond a few examples of this sort, it is believed that names mislead quite as much as they assist us. It is seldom that we see, in practice, the exact set of symptoms described in books under a particular name. Fever, indeed, we may sometimes witness, in its simple state; but *typhus* fever is never precisely the same in any two individuals, or at any two different times. Along with the fever will be associated, at one time, disease of one organ or function of the body; at other times, disease of some other part. Such is the variety of appearance depending on the circumstance just mentioned, and a thousand other things, that it is not too much to say, of typhus fever, that it never was twice alike, since its first appearance. And what I affirm of typhus fever is true, in a degree, of almost every thing else, from cholera, small-pox, plague, and fever, down to colds, headaches, and indigestion. No physician ever finds precisely the form of disease which he has seen described in books, or the same which he has before beheld in practice.

But, if diseased action is never twice alike, is it not obvious that the attachment of names to particular forms of it is greatly liable to mislead? If typhus fever, occurring to-day, is described, together with its treatment, by a medical man, is it not obvious that typhus fever, occurring to-morrow, in different circumstances, and with certain different symptoms, should not be treated precisely in the same manner? Yet what is it, in such a case, which the ignorant and unthinking desire to know? Is the disease typhus fever? they ask. Then it must be treated so or so; that is, just as what was called typhus fever some twelve months, or twelve years, or twelve hundred years, ago, was then treated. Is it consumption, or pleurisy, or dyspepsia, or gout? Then it must be treated — so says ignorance — as consumption, pleurisy, dyspepsia, or gout, has been treated before. It is enough, with them, to know the name of the disease; a cure is always ready. And the more ignorant the individual, — provided he observes, or remembers, or takes any interest at all in the subject, — the more certain he is of being able to cure what is *called* typhus fever, or dyspepsia, to-day, by the means which appeared to cure

what was called typhus fever many weeks, or months, or years, ago, or in some other country; whereas the more truly wise he is, the less he cares about names, and the more about the existing symptoms.

Hence, then, I repeat, comes much of our quackery. Is a child sick? If the mother is what is called an observing woman, and fancies she discovers the symptoms of a certain disease, she has only to remember how that disease was treated at some other time, — especially if the patient recovered, — or, at most, to look in a medical book, — to know how to treat it. It is of less consequence *what* the disease is; if she is sure it *is* the disease, she knows how to manage it. And her confidence, I say again, — and the remark will apply to apothecaries, quacks, and many of the more ignorant physicians, — will be just about in proportion to her want of just and correct knowledge.

Erroneous as it must be obvious it is, this is the medical practice of a great part of the world. We doctor for names, and not for symptoms; whereas we should pursue exactly the contrary course — prescribing for symptoms,

and not for names; for the present disease, and not for a disease which existed some years or centuries ago. Such, I mean, should be the case, if we prescribe at all. But this brings me to the consideration of a third popular error.

The general belief that we can often cure disease, or, as physicians say, change or remove morbid action, may well be doubted. The fact is, that we seldom cure disease at all; nor, if we could cure it, would it be safe, at least as a general rule. Disease is the consequence or sequel of violating one or more laws of the human constitution. The injured system went on as well as it could, and as long as it could, till it became necessary for a change, to prevent entire destruction; and this change, for which there seems to be a provision in the wise arrangements of divine Providence, is what we call disease. This interposition of diseased action — this onward, health-bound course — should not, as a general rule, be interrupted. The most the judicious physician attempts to do, is to assist a little, by removing obstructions; never thinking, at least as a general *rule*, I say again, of taking the ship out of the hands of the divine Pilot.

True it is, that, in former times, it was believed, by many, that the natural course of disease might be much shortened, and sometimes broken up; nor do I doubt, even now, that it can be done; all I question is, the safety of so doing. For, if disease is the natural punishment of transgression, as instituted by God himself, by what right do we interfere? Who would justify a third person in arresting the arm, and preventing the blows, of a parent, possessed of only finite wisdom, on a refractory child? Why, then, let me ask, should we dare to arrest, or attempt to arrest, the arm of a Parent possessed of wisdom which is infinite, and which, in inflicting a penalty, cannot possibly err?

If these great practical errors, as they are believed to be, — that diseases are *creatures*, known by *names*, as animals, plants, and trees, are, and can be safely and properly *cured*, — could be removed from society, we should remove, at the same time, a large share of the temptation to quackery which exists, and save the world from a large portion of its suffering and disease. Mothers and physicians would better understand their province respectively, and confine themselves to their respective duty.

Physicians, also, would then be encouraged with the hope that a better day was about to dawn on society, and would, accordingly, do something to hasten it, by encouraging the general diffusion of a knowledge of the *structure*, *functions*, and *relations*, of the human being, — or, in other words, of anatomy, physiology, and hygiene. Mothers, too, rejecting the study of medicine, — foreign or domestic, mineral or vegetable, alleopathic or homœopathic, together with the study of medical books, — would seek to know the laws of health, and the causes of disease, that, by obeying the former, and teaching their offspring to obey them, they might escape the penalty of disobedience in the infliction of the latter. They would also banish their medicine-chests and closets of medicine, and expend that labor and thought on *prevention*, which was formerly expended on *cure*.

For, even if we were to admit the safety and expediency of attempting to remove or cure diseases, the mother is not qualified to attempt it; nor can she well become so, by the means usually applied. No person can be qualified to give medicine to a child, or even to a brute animal, by merely reading a medical work

on disease, unless he has received previous instruction in regard to the laws of health, or healthy action. There is not a medical school or association in the world, that would permit a candidate for the practice of medicine or surgery to go forth with its sanction, till he had made some progress in the study of anatomy and physiology. Grant that the knowledge required is far from being thorough; yet it will not and cannot be denied that such *knowledge is required.* No matter if the candidate has read all the books on the *practice* of medicine, properly so called, that ever were written; he could not and ought not to be licensed. How, then, can mothers — trained in ignorance of natural science of every kind, and likely to remain in ignorance — expect to fit themselves to prescribe for the complaints of infancy and childhood?

"Buchan's Domestic Medicine," a work written in England, some fifty years ago, and extensively circulated, both in the old world and the new, is doubtless as good a work for the untaught mother as any which can be named, because it encourages a reliance on pure air, cleanliness, exercise, diet, &c., not only to pre-

vent disease, but, in its incipient stage, to cure it. Yet even Dr. Buchan would seem to wish to make "every one his own doctor," and to encourage all, or almost all, by his frequent prescriptions, to use more or less of medicine.

But Dr. B. is among the better sort of popular teachers, after all; and if mothers, who have read his book, have, in consequence, slain their thousands, others, who have written popular medical works on *practice*, have doubtless been the means of slaying their ten thousands. Their works ought, if it were possible, to be *proscribed;* they are more destructive than plague or cholera.

I am not of the number of those who desire to wrap up the medical art in mystery. On the contrary, I am ever ready to do — what, indeed, I have for twenty years been doing — every thing in my power to hasten the glad day when mothers will be so taught, as to be able, by guarding against the causes of disease, to prevent the necessity, in their own families, either of medicine or physicians. At the same time, I will not, I dare not, incur the fearful responsibility of remaining silent, while weapons are continually placed in their hands, that, like

a two-edged sword, cut both ways, any faster than they can be taught how to use them. "The best part of the medical art is the art of avoiding pain," * or the art of prevention. This part of medical practice, mothers of every degree of intelligence may pursue with perfect safety.

The large work of Dr. Dewees, on physical education and the diseases of children, were it not so expensive, would be of more value to mothers than any other — I might, indeed, say, all others — with which I am acquainted; † for, though designed exclusively for medical men, it does not encourage the free use of medicine, but rather dissuades from it. No less than 200 pages in 530, or more than *one third* of the work, are devoted to the prevention of disease,

* See the motto to the "Boston Medical Intelligencer," published, several years ago, in Boston, and edited by Dr. John G. Coffin.

† I mean that Dr. D.'s book is the best for popular use. A more erudite volume, on the diseases of children, by James Stewart, M. D., of New York, has recently appeared; but it is calculated almost exclusively for the medical practitioner. Nor do I find, on examination, that, though learned, it contains much that is new, aside from a little peculiarity in the classification of diseases. There is also a good work republished among us, written by Drs. Maunsell and Evanson, of England; but it is for physicians.

by discussing its causes, and to directions in regard to diet, dress, air, temperature, exercise, cleanliness, &c., while actually sick. Mothers, who should read this, would not feel, as many do, when they have read a book on the mere treatment of diseases, that they now understand the whole subject. They would see, most clearly, the folly of trusting wholly to medicine to cure the sick; and that Nature, either with or without medicine, does the cure after all. They would be as fearful of incurring responsibility, as they now are ready to prescribe their *certain cures* for every disease.

What, then, are we to think of those — and such there are — who, in preparing a work specially for mothers, devote only *one fifteenth* of it to the subject of prevention, and about *half* of it to *mere doctoring* with emetics, cathartics, mixtures, powders, pills, boluses, linctuses, liniments, blisters, and enemata? — to the free and unlimited use of calomel, antimony, jalap, scammony, aqua fortis, zinc, and ipecacuanha? What shall we say to a work — and such a work we have among us — which, while it devotes but a *page and a half* to the *description* of four diseases, — thrush, gravel, worms, and chil-

blains, — takes up, with mere *medical treatment*, no less than *eight* pages?

Such is by no means the information needed by mothers. They will be much more benefited by instruction which will enable them to understand the nature and tendency of diseased action, and especially the causes which excite it. They will be much more enlightened and fitted for their duty, by the kind of information which is solicited in the following extracts from letters received by the author: —

"I am anxious my child should be vaccinated as soon as you think it can safely be done. Should you think it could be done to advantage in two or three days, or a week? If it should not pass the meconium well, ought it to take any medicine? If the child should be cross-eyed, would you advise to have it operated upon? And if so, how soon, and by whom?"

"Our babe is now three weeks old. For about a week past, he has been troubled with wind in the stomach, which causes him to worry considerably in the afternoon. He is pretty quiet during the night and the forenoon. His

evacuations have been frequent, say six or seven times a day, of a green, viscid substance. To-day, however, they have not been so frequent. A female friend says she could give it something to help it immediately, or at least something that always helped her children. Now, we don't know exactly what to do. To be sure, the child is not in a *very* bad condition; but we don't like the evacuations. You know we are not very scientific, and have not had experience in these matters; so we do not know the causes of things. What is the cause of the wind in the stomach? Is it any thing that the mother eats? If so, she will abandon it at once. She has been very careful, thus far, and endeavored to be regular in all her habits. A thought has just now struck me. The physician (a homœopathist) gave her something the other day for piles; would taking this be likely to have any effect upon the child?"

These, I mean to say, are specimens of the kind of information which some parents are beginning to seek, at the hands of medical men; and which, in the present dearth of written instructions on the subject of physical manage-

ment, easily accessible to them, they certainly ought to seek. It is a thousand times more rational than to be grasping at every *certain cure* for worms, and flatulence, and acidity, which can be found in medical books, or procured from physicians.

It will, perhaps, be said, on perusing the following work, that, so far as I recommend any treatment at all, it is the same thing, substantially, in every disease. No matter for this, however, if I recommend the *right* thing. But the truth is, I do not recommend any medical treatment at all, except in a very few instances. Is it said that I do what is equivalent to prescribing medicine, since I refer the mother, in cases of difficulty, to the skilful physician? But what then? I do not send her to the physician, in the expectation that he will, as a matter of course, order medicine; but that he will, if wise enough, take measures which will preclude such a necessity; though, if medicine is to be given, the physician is certainly the proper person to administer it.

I do not, indeed, suppose I have prepared a perfect work, — very far from it. Still, I cannot but hope I have done something towards

filling a chasm in the series of books which I have been enabled to prepare, within a few years, for popular instruction. If the effort shall be an instrument, however feeble, in raising up a more vigorous and healthy generation than the present, it is all I expect, and more, perhaps, than I am *justified* in expecting.

MOTHER'S MEDICAL GUIDE.

Absence of Respiration, or Infantile Asphyxia.

No medical man, of experience, can have a doubt that thousands of our race are every year, hurried out of existence, and other thousands rendered feeble for life, from the mere want of a little knowledge of what should be done in what is called the asphyxia * of new-born infants. True it is that the responsibility usually falls on medical men themselves, because they are the usual attendants. At the present time, however, when there is a growing inclination to employ female physicians, rather than males, in whose hands, unenlightened as females for the most part now are, the danger to which I refer is greatly increased, it may be desirable to give a few general directions.

It should be well understood, not only by every practitioner, but by every parent, that the separation of the child from its natural, parental connection,

* *Asphyxia*, existence without breathing.

can never be accomplished, with safety, till the new action — that of its own lungs — is fairly established. In children constitutionally feeble, the setting up of this new action, in the child's lungs, often requires so much time, as to tax, most seriously, the patience of all who are concerned. Wo to the individual who commences existence under the direction of that ignorance of the laws of health and life that knows nothing, in these cases, of the necessity of deliberation, and the advantages of patience.

Whatever, therefore, may be the cause of asphyxia in a new-born child, the connection referred to should never be broken up, till the general circumstances either of the parent or the child render it necessary. Haste, here, merely for the sake of making haste, is death; and, in a state of society where all were acquainted with anatomy and physiology, would receive the sentence of disapprobation, whenever it involved subsequent feebleness or premature death, as much as if the same effects had been induced by any other act of violence. What is the mighty difference between suspending life, or injuring health, by preventing forever the natural flow of the vital current, and the more obvious act of producing similar results, by arresting a current which has once flowed?

On the causes of suspended animation or want of respiration in the new-born infant, it is not my purpose to dwell longer than simply to make such

general statements as may secure the attention of those whom it most deeply concerns, and lead them to make further inquiries. Were the facts in the case fully understood, there is reason for believing we should be less apt than now to interfere with, or, above all, attempt to hurry, the practitioner; and that we should have, as a consequence, fewer feeble constitutions, and less disease and premature death.

It is related of one of the most eminent men of the last century,* that he owed his life to an accidental rescue from that state of suspended animation of which I am speaking. Yet he was never free, during his whole subsequent life, from the consequences. His existence was always held by a very feeble tenure, and was extinguished before his sun had fairly passed its meridian.

Notwithstanding the difficulty of ascertaining how it is that so much permanent mischief should be done by a cause which does not seem to impair the structure of the living machine, no fact seems to be better sustained.† It is, indeed, quite possible that the consequences would be less serious, if there

* Dr. Doddridge. — I do not overlook the fact here, that a degree of feebleness, induced by hereditary causes, may have preceded the asphyxia. But, however this may be, asphyxia is not the *less* debilitating on account of it.

† Dr. Dewees says, "We have reason to believe we have seen several instances of death, and this of a painful and protracted kind, from the premature application of the ligature." See his work on Children, p. 277.

was no medicine given afterwards, under the vain idea of invigorating the child. In the present state of human society, such dosing and drugging is almost inevitable, and it unfortunately falls on those children who, though they seem most to require medical aid, are, as a general rule, least able to bear it.

I must advert to one more cause of this want of respiration. In some instances, there is a large quantity of mucus lodged either in the back part of the mouth or in the top of the windpipe, which might be easily removed by a piece of soft, dry rag drawn across the little finger, and applied to the top of the throat, at the same time elevating the hips and lower limbs a little higher than the head, and occasionally inflating the lungs; not, indeed, by a pipe or bellows, as some have recommended, but by the mouth. Some advise that, while we blow into the child's mouth, we should compress the bowels at the pit of the stomach with one hand, to prevent the air from inflating the stomach. I do not think there will be any great difficulty in removing the cause of obstruction in this way, especially with the aid of the warm bath and a reasonable degree of perseverance. If the warm bath is beneficial, however, it is so immediately, and should not be long continued.

But it may be hoped that what has been said here, in the way of information, will seldom be needed. There should always be at hand, in these

circumstances, a wise, careful, and skilful practitioner, — whether male or female is of less consequence, the grand point being to avoid quackery. It is ignorance, licensed and unlicensed, and not medical skill, that destroys life, so frequently, at its very threshold ; and, what is worse, imposes on society a mass of suffering so great as to render almost proverbial the saying that " man was made to mourn."

Syncope, or Fainting.

This condition of early infancy, which has been described under various names, as the " blue disease," " fainting fits," &c., may take place at two very different periods — first, immediately after birth ; and secondly, not till *several days* have elapsed.

Of the first condition and its causes, I shall say very little; for, like the want of respiration, it falls almost wholly within the province of the regular practitioner. It must, however, be observed that, if great care be not taken to prevent a recurrence, the same causes which produce the fainting immediately after birth will be likely, after the lapse of some little time, to cause its repetition. An individual, of much experience in his profession, mentions two

instances where there was such a tendency to a return of the "fainting fits," that the children could not endure the fatigue of washing and dressing, with safety, till they were a month old. But such cases as these last are very rare.

It more frequently happens that a child who was feeble at birth, or was by some means early made feeble, and perhaps had fainting fits at that time, but yet seemed partially restored to health and vigor, suddenly and unexpectedly becomes pale, flaccid, and cold, and almost stops breathing. The fingers and hands become blue or black, the lips livid, the eyes fixed or half shut, the pulse stops, and the child appears to be "gone." After a while, however, a slight twitching appears about the mouth; the child makes a strange noise, accompanied by a kind of half breathing; the color of the hands, nails, and lips, begins to return; the eyes and the pulse begin to move a little; the child cries very feebly, and at length recovers. It will indeed appear languid and uneasy for some time after the fit is over, but will usually be able to swallow whatever is given it. A small quantity of a greenish fluid is almost always discharged from the bowels during the fit.

If there is any one among the frightful catalogue of ills to which flesh is heir, about which the mother needs instruction more than any other, it is this One whose experience of "forty years" eminently qualified him to give an opinion in regard to the

necessity of instructing mothers on the subject of these early infantile diseases, has furnished the following testimony: "Every mother of a family should be acquainted with the proper method of treating children upon such emergencies, since she may be so situated as to direct them, either in her own case or that of a friend." For it is not in this disease as it is in most cases of infantile disease, that we have time to send for a physician, especially if he is at a distance. What is done must be done quickly.

What, then, is the most approved method of treatment, in this alarming and dangerous disease?

As soon as the child faints, flannels should be wrung out in water, as warm as the child can bear it; small mustard poultices should be applied to the temples; a drop of spirits of hartshorn may be mixed with a few drops of water and put on its mouth; and the nostrils should be wetted with vinegar.*

This treatment, it will be perceived, is wholly external, at least if we except the hartshorn and acetic acid, (or vinegar,) a part of which is doubtless inhaled; and it should be so. Nothing can be more unsafe than any attempts to make the child swallow

* Dr. Maunsell, in the recent work of Maunsell and Evanson, on the Diseases of Children, says, "During a paroxysm, all we can do is to sprinkle the child's face with cold water, and expose it freely to cold air."

something. Still worse, as I am compelled to regard it, is the direction, given by a few writers, to force the fumes of lighted tobacco into the mouth of the little sufferer. It were far better to leave it wholly to nature; for, in the latter case, the child would, in all probability, come out of the first fit, and we might gain time to send for the family physician; whereas in the use of the tobacco there is great danger of extinguishing life at once.

If the plan which has been recommended is persevered in, there is strong hope that the child may gradually recover, and that the fits will not recur. On the latter point, however, there is no certainty. The causes are so obscure, and some of them, probably, so deep, as to be beyond our discovery or control. Fortunately, the disease is not very common. The child, after the fit disappears, may not be able at once to return to the breast, in which case, it is usual to feed it with a little wine whey. Great care, however, should be had in regard to the quantity given at once. A few teaspoonfuls, often repeated, will be better than a larger quantity, at longer intervals.

Retention of the Meconium.

The meconium takes its name from its supposed resemblance to the sirup of poppies. It is that sub-

stance which is found in the bowels of the new-born infant, and which has been for some time collecting there. Its color is generally a dark or yellowish green; though it may, and sometimes does, vary from a dark to a light shade. When this substance is permitted to remain in the system too long, it often produces great mischief, especially in hot weather, or in warm climates.

On this subject the attendant physician will usually give all the necessary directions, especially if he is such a man as he ought to be; but, as it sometimes happens that there is no attending physician at the time, or, if present, he is not consulted on this important point, and as there is, every where in the community, a strong prejudice in favor of *doing* something, it is proper, here, to give such directions as will be likely to prevent mischief.

The first milk of the mother is "nature's" physic, in these cases; and this, as a general rule, if not neglected, is the only physic which is necessary. The nurse or attendants, however, are almost always in favor of administering to the supposed necessities of the case, by the intervention of some filthy substance or other,* without waiting for the effect of nature's *own* medicine. They also, very generally, fall into another error. They refuse to put the child

* The bare enumeration of the articles used for the purpose here referred to, would disgust every ordinary, not to say every decent reader.

to the breast as early as is desirable, even though the mother may request it. True, they have their reasons. First, it will not *draw*, they say, if they do; and no wonder, when its little stomach has been filled to overflowing, and even to nausea, with disgusting liquids of one sort or another. Secondly, they tell us that to put the child to the breast is useless, because it can get nothing so early. Thirdly, that it will only cause the mother present and future trouble; perhaps, even soreness.

Now, as to the last objection, it has no weight, whatever, with me, because it is not based on fact. The first objection I have already answered. I have, therefore, to contend only with the second.

It is certainly possible — I might, indeed, say probable — that the infant will get nothing in its first efforts; but the very attempt will have a good effect on the mother, and thus prepare the way for its own future success.

In no case, therefore, should the placing of the child at the breast be deferred longer than three or four hours after birth; unless, indeed, the mother is uncommonly feeble, or unless something should occur of a very extraordinary kind. If the first effort is successful, as sometimes happens, it will be of very great service both to the child and its mother; and if it should be unsuccessful, we shall, at least, have the satisfaction of having done our duty, according to the best views of the nature of our duty

which we have been able to obtain. We shall have time enough, after this, for giving the child *physic*, should its use become indispensable.

In the range of my own observation, however, — and I believe the experience of the oldest and wisest physicians leads to similar conclusions, — I have seldom, if ever, found occasion for the use of medicine. If we will only exercise a little patience, the bowels will usually act in a reasonable time. It is only when there comes on an enlargement or swelling of the abdomen, with crying, retching, vomiting, and drawing up the knees, that we ought to have any serious apprehension with regard to the results. Nor is the danger, even in these circumstances, so great but that we have time enough to send for a physician — a thing which, when such symptoms supervene, ought always to be done.

"Extremes meet," it is sometimes said; and here, in connection with the point at which I am now aiming, are one or two instances of it. People are frequently averse to medicine, so they tell us; and yet, at the very threshold of life, they are, almost without exception, predisposed to administer it. Multitudes among us have no conception of the possibility of dispensing with it, without the utmost danger. Again, though they dislike medicine and physicians, many will send for the latter, on the most trifling occasions of ordinary ill health; while here, in a matter of exceeding great difficulty, they usually re-

fuse, most peremptorily, to send for counsel or aid, believing themselves fully competent to the management of the case.

My advice — I repeat it — is to give the child nothing at all, at first; hardly as much as a teaspoonful of water. After the lapse of a very few hours, it should be placed at the breast; and whether it gets any thing or not, or even whether it will draw or not, we should continue to apply it very frequently, till it will draw, and till it evidently labors not in vain. And as to the meconium, I have no fears about it, if a child nurses, at least until the symptoms appear which have already been enumerated, when you will, of course, send for your adviser. If the child is doing well when he arrives, you will have time to consult him on important points with regard to its general physical management — a thing which you will always desire, and should always highly value, since you obtain at a very low price, what you cannot otherwise procure, except by being subjected to a tedious pupilage, in the hard school of experience.

It will still be asked, I doubt not, What is to be done, if the physician does not arrive as soon as he is expected, and the symptoms appear to be very urgent? Some will even be led to inquire — those, I mean, who have looked into medical books a little — whether spasms, convulsions, and epileptic fits, may not come on from neglect.

Now, although I have no doubt that the danger of

delay has been greatly aggravated, not only by the multitude of the ignorant and the unthinking, but even by medical men themselves, yet it cannot be denied that danger exists. The meconium, if too long retained, becomes a foreign body, and is, or may be, a source of much irritation, especially to children of highly susceptible constitutions. Still I have not the smallest doubt that the distress in the stomach which so often awakens our fears in these cases, and which even leads to convulsions and death, is much more frequently induced by our own interference than by the irritation of the meconium. Or, if the latter is a cause of some degree of irritation, the medicinal mixtures of which people are so fond, add greatly to the difficulties already in existence. Most of the popular preparations or doses which nurses and mothers — ay, and some physicians too — administer, in the belief that they are necessary to purge off the child, only produce flatulence,* and cause crying and retching, and perhaps vomiting; and then, forsooth, the trouble is charged to the meconium.

Still, I again say, the meconium may become a source of irritation, and the mother or nurse may begin to entertain reasonable apprehensions. In these circumstances, I would give — not a dose of sweetened water, or even of castor oil, at first, as is

* *Flatulence*, a windy or gaseous state.

the common medical prescription, but — an injection of half or two thirds of a gill of molasses and water. Great care should be taken about the temperature, and to avoid irritation of the very delicate lining membrane of the intestines. The liquid should be about the heat of the blood, that is, 98° of Fahrenheit, but never higher; and the point of the syringe should be defended with sweet oil.

Whether or not the meconium is in the lower portion of the intestine, and becomes a source of irritation, in these cases, on account of its mere dryness, this method of treatment will usually dislodge it, and without that disturbance of the stomach which, in a tender infant, above all, should be avoided, if possible. If it should in any instance fail, there will still be opportunities enough for operating on the stomach, whether by castor oil, or any thing else. Managed properly, however, I do not believe any artificial treatment whatever will be necessary in one child in fifty, if, indeed, in one in a hundred.

Jaundice.

There is not unfrequently a yellowness of the skin in new-born infants, which excites not only great anxiety, but also much alarm. It may continue several days, and then disappear without med-

ical treatment, and without any perceptible injury to the child's health; or it may continue for many weeks. In the latter case, however, there is great reason to fear it is often perpetuated by ill-judged interference.

The causes of this appearance are involved in some obscurity; and yet we are not deprived of the privilege of conjecture respecting them. As the liver is most obviously at fault in some way, and as many things which nursing mothers are apt to take have a tendency to disorder this viscus,* it is quite possible that a large proportion of cases might be traced to this source.

As the disease is admitted, on all hands, not to be attended with immediate danger, I shall give no directions in reference to its treatment, except to advise the mother to consult her family attendant as early as may be convenient. He will probably pay the strictest attention to the purity of the air in the nursery, to the temperature and the cleanliness of the child, and to the diet and habits of the mother. He will prohibit — he ought, at least, to do it — the use of all such drinks and condiments as, when carried, by means of the milk, into the child's circulation, in the smallest quantity, tend to disorder its liver; such as spices and drugs, tea and coffee, and fermented and distilled liquors.

* *Viscus*, a part or organ; noun singular of *viscera*.

Retention of the Urine.

This is a very frequent complaint — at least it is very frequently complained of among nurses — and is, indeed, sometimes a source of much trouble, though, like many other infantile complaints, it is doubtless made more troublesome by injudicious interference. There is, in fact, no evil to which flesh is heir, especially in the earliest days and hours of existence, for which nearly every mother and nurse has not her supposed specific. And, what is worst of all — what, indeed, I have already adverted to in another place — the greater her general ignorance of the laws of health and disease, the greater her confidence in specific remedies.

One of the evils of the present case is, that in our impatience we are apt to construe into disease that which is not worthy of the name. A few hours of retention is not a serious evil, by any means. It is only when the retention has been so long continued as to cause pain, either by irritation or distention, that there is cause of alarm. So long as the child manifests no symptoms of pain, either by moaning, or crying, or by drawing up its knees towards the bowels, we should not be over-anxious.

But when ten, twelve, or fifteen hours have elapsed, and no urine has been discharged, or, if any, only a few drops, and there are signs of irritation or pain in

the region of the bladder, it is time to attend to it. The treatment is, in general, very simple. The worst case I have ever seen, yielded in a very short time to fomentations of the lower part of the bowels with flannels wrung out in warm catnip (or catmint) tea, and changed as often as they grew cool. Perhaps simple warm water would be equally useful.

Some use the warm bath; and, if the fomentations are not successful, I would resort to it. Let the temperature be 98° of Fahrenheit, and let the child remain in it some five or six minutes, if quiet. The worst evil the warm bath involves is an uncertainty whether the child is relieved; for it may be quieted a short time by it, and the symptoms of distress may afterward return. Of course, their return will be the proper evidence that we have not succeeded; but there will have been a delay in regard to sending for a physician, which is deeply to be regretted.

In one case in a thousand, and perhaps something more, it will come to this — that medical counsel will be required. When it is so, the quicker it is procured the better. I repeat it, avoid the specifics with which kind-hearted but ignorant friends will be disposed to load the child's stomach; for, in a vast majority of cases, they will only add to its suffering; and if it must be dosed, let it be dosed on principle, and not empirically.

Aphtha, or Sore Mouth.

Aphtha, thrush, or, in plain language, *sore mouth*, is a disease to which infants are more subject before they are a month old than afterward; though they are never wholly secure against its attacks. So common, in fact, is the *baby's sore mouth*, as it is sometimes called, that many mothers have fallen into the belief that all children must have it, at least once in their lives, as much as the measles or whooping cough. But this opinion is manifestly incorrect; for the robust and healthy children of some healthy and judicious mothers always escape it. It does, indeed, seem as if particular families were more subject to it than others; though of this we are not, and cannot be, quite sure. As a general rule, it falls most frequently, and with most severity, on such infants as have, by any means whatever, become debilitated; and, hard as it may appear at first view, children are, in this way, among many others, made to suffer for the iniquities or errors of the parents.

Improper food and drink, especially that which is too hot, too cold, or too stimulating, and confinement in too warm an atmosphere, are among the most common exciting causes of this disease in infants; though even these causes themselves, powerful as they may be, will seldom produce the disease, without the existence of previous debility; such, for

example, as that which is induced by some of the causes of want of respiration mentioned at page 28, and onward.

When the infant begins to be unusually languid and sleepy, and eruptions of a whitish kind to appear about the corners of the mouth and inside of the lower lip, we may reasonably begin to suspect thrush. The appearance soon becomes that of fragments of curdled milk, and the disease spreads, by degrees, over the whole inside of the mouth and tongue, quite to the top of the throat, and, occasionally, to the stomach. It is even supposed, by many, to affect the whole alimentary canal, and, in not a few cases, to be symptomatic of the more deep-seated disease.

When the disease becomes severe, either from mismanagement or any other cause, the eruptions become dark-colored, and the scabs formed upon their surface fall off. This process is repeated several times; the eruptions continually becoming darker in their appearance.

As the disease is, at first, a mild one, the physician is less frequently called on for advice, than in many other complaints which are far less formidable. Every one fancies she knows how to cure sore mouth. Nor can it be denied that, if left wholly to itself, in a healthy child, it will gradually, for the most part, disappear. It is the officiousness or meddlesomeness of mothers and nurses, more than any natural tendency to severity in the disease itself, that

so often renders it a source of prolonged and intense suffering.

The mother's highest duty, in regard to this as well as most other infantile diseases, is to labor in the field of prevention. Here is ample room for exercising all the knowledge of the human frame — its laws and tendencies — which custom has permitted her to acquire.

Some medical men believe and teach that a single teaspoonful of cold water, given to a child each morning, from its birth, will entirely prevent the appearance of aphtha; and I can truly say that I have never known the disease to make its appearance where attention was paid to this custom. There is one thing to be considered, however, which is, that most, if not all mothers, who would put confidence in this prescription, would be likely to pay more than an average share of attention to the other physical habits, both of themselves and their children; so that it will still remain a question how far the teaspoonful of cold water has influence. But I must honestly confess that I have more confidence in the application of cold water — provided it is done cautiously — to the outside of the body than to the inside.

One popular medical work for mothers has much to say in regard to the treatment of this disease. Many of the remarks it contains are, most obviously, neither intelligible nor correct; and I may be permitted to go out of my way a little, for once, to ex-

pose what I believe to be its errors, and by the *exposé* to furnish a little *instruction.* We are told, for example, that all hot and irritating food and medicine, in case of the thrush, must be strictly avoided. Does the writer mean by *hot* food those things in common use, which, whether taken warm or cold, have a tendency to heat the system while they are undergoing the process of digestion, or after they have entered the circulation?

How few mothers there are among us, who have any correct or even any settled notions in regard to the meaning of the word *irritating*, as it is used in this connection! Is that food irritating which is difficult of digestion — which taxes to the utmost extent the stomach and other viscera; or does the writer, like some other writers, mean *animal* food, or food which is *highly seasoned?* * And what is irritating *medicine?*

"Nor must any thing be given," we are told, "which is not light, softening, and cooling." It may be sufficiently obvious to some readers what is meant by *cooling* things; but what are the articles which are "light and softening"? Here, at least, is room for doubt. It is certainly desirable that a mother's book should have in it a *little* of explanation.

* Perhaps it is necessary to remark, here, that by stimulating food, medical authors very generally mean animal food; but that *heating*, and especially irritating, food is not always used in a sense quite so much restricted.

In fact, there is by no means entire agreement among us as to what is cooling. Multitudes in New England believe rum to be cooling, a part of the year; I mean in hot weather. Not, to be sure, as an ordinary drink — at least to a very great extent — since the days of temperance commenced; but spirits may be used as a *medicine*. Now, how would the writer of the work of which I am speaking like the idea of having rum in the mouth, throat, and stomach, of the little sufferer?

These remarks are made, not so much in the expectation that one mother in a thousand, who should read the work in question, would give rum to an aphthous child, as for the purpose of showing how indefinite medical and other writers are in their directions. For there are few things, solid or liquid, short of spirits, which are not deemed cooling by one person or another.

By the way, the author of the above-mentioned work goes on to give a list of what may be eaten and drank by an aphthous child — a list quite long enough for common purposes. But, lest there should be a hankering after something more, he adds that all *harsh*, *hard*, or *heavy* kinds of food are not only difficult of digestion, but give exquisite pain to the parts affected. Here, again, the mother will need a little friendly aid, in the explanation of *terms*.

But now for the *treatment*. "*A gentle emetic*, consisting of four grains of ipecacuanha and two of

sulphurated zinc, is to be given for three or four days, every morning. Two or three grains of calomel, with three grains of jalap, mixed with honey, should be given in the evening, to open the bowels, when it appears necessary."

But when is it "necessary" to give the calomel and jalap? Admit that they are wonder-working medicines, whenever they are wanted, yet they are not very safe playthings. Besides, will children, of all constitutions and habits, require exactly the same dose? We have seen that the disease under consideration occurs most frequently among weakly and feeble children, less than a month old; and the writer himself, to whom I refer, professes to speak of children *only*, and even of weakly children.

Now, "four grains of ipecacuanha and two of sulphurated zinc," every morning, for three or four successive days, followed by three or four grains of calomel and three of jalap every evening, would be "no trifle" to a weakly child who was even two years old.* Do not such loose directions to families that chance to read the work, expose to destruction great numbers of infants?

Now, I am exceedingly hostile to the use of all these medicines, in cases of aphtha — calomel, zinc, jalap, and ipecacuanha. They debilitate too much, even in very small doses, and in the hands of a

* The doses mentioned were intended for children two years old.

skilful physician; and in the hands of mothers, as they are now trained, they are still more dangerous. In truth, many of the ablest practitioners, in children's diseases, which this country affords, neither use them nor encourage the use of them. Dr. Dewees, who was, in his day, one of our first practitioners in infantile diseases, though he has written largely on the thrush, does not even mention them. Professor Ives, of New Haven, another very able practitioner, says nothing of their use, except ipecacuanha, which he thinks may sometimes be given as a gentle emetic, very early in the disease. Shall mothers and nurses be encouraged to use what the oldest and best physicians among us do not venture upon? It is downright quackery in its results, however excellent may be the intention.

One way of preventing such a murderous course of medication, would be to teach, not only to quacks, both licensed and unlicensed, but also to mothers and nurses, the whole philosophy of a wiser course; involving, as it would, a thorough and practical knowledge of the structure, laws, and relations, of the human being. But, since this is impracticable, we are naturally led to inquire what is the next best course.

This is to encourage mothers to do what they are able to do, and then call for intelligent advice. And every mother of plain good sense will understand me when I assure her she is able to do much;

and when I explain to her what it is at which she should aim.

The mother will accomplish more, in the case of the *very* young aphthous child, by properly taking care of *herself*, than by any other *one* thing which she can do. She must have sufficient exercise and sleep, and a proper supply of pure and healthy air. She must observe, with great strictness, the general and highly-important law of cleanliness. She must abstain from every kind of drink except water, with perhaps the addition, at times, of a little milk to her water, or a crust of toasted bread. Fermented and distilled liquors, and even tea and coffee, will all of them be, in a greater or less degree, poisonous to the child. She must also adhere, with great strictness, to a plain diet, avoiding every thing which is difficult of digestion, or which readily induces acidity of the stomach. She must be cautious in the use of green or crude vegetables, and imperfect fruits; but she may use rice and bread with considerable freedom. She must also preserve, along with other things, a good degree of cheerfulness.

She will also do much by attending to the general condition of the infant. Pure air, a suitable temperature, and a due regard to cleanliness, are as necessary to the child, as to the mother for the child's sake. It must even have, in its way, a good supply of exercise. As to food, let it have the least possible quantity with which it will seem cheerful and happy; and

if of a suitable age to receive it, let it drink mucilage of gum-arabic, barley water, and the like.

The only medicine I shall recommend is a little borax and loaf sugar finely powdered, mixed in equal proportions, and thrown into the child's mouth every two hours — the quantity used at each time being about as much as will readily lie on the point of a common penknife. Thus administered, the child will move it about with its tongue, till it reaches every part of the mouth, and comes in contact with most or all of the sores. Caution must be used not to rub the mouth with any thing whatever.

This is all of local treatment which the mother should attempt. Beyond this, she should have the advice of her family physician, if needed, and, if she follows it in any degree, should follow it strictly. Let this last suggestion never be forgotten or unheeded.

In nearly all the cases which occur, the foregoing suggestions, duly regarded and followed out, would prevent the necessity of medicine or physician; and, where a physician was called, would render his treatment far more successful than in other circumstances. Good physical habits, in parent and child, are not only the best preventive of disease, but also the best means of mitigating its severity when it has actually arisen.

Red Gum.

This disease, like aphtha, is confined to early infancy; usually to the first two months. Very few children wholly escape it. Indeed, its appearance is regarded by most nurses as not merely a necessary evil, but as a favorable circumstance; and many a poor child is dosed with saffron, catnip, or snakeroot-tea, till its stomach is actually disordered, with a view to invite its appearance.

The red gum manifests itself, in the beginning, by a pretty abundant crop of fine, but bright-red pimples within the mouth, which afterward spread to the cheeks, arms, and back of the hands, and occasionally to the whole surface of the body. Sometimes, the pimples are distinct from each other; at others, they run together in large red patches. Occasionally, though not often, some of the eruptions appear to be watery; but I believe they never break.

Red gum is occasionally the sequel or termination of thrush. More generally, however, it seems connected, in some way, with a disordered stomach, or with deranged bowels. This derangement may be induced in a great variety of ways; such as an improper condition of the mother's milk, excess in the quantity of food, too warm clothing, or being too closely covered, so as to create a necessity of breath-

ing the same air over again; and finally by a constitutional feebleness of stomach.

Great pains should be taken to avoid every thing which tends to acidity, or which is liable to debilitate the stomach, or the general system. It is a mistake to suppose that its appearance is favorable; and the general impression, of which I have spoken, that it is so, is one of those prejudices with which we have every where to contend. If the laws of health were duly studied and obeyed, by parents, both as respects themselves and their children, we should probably hear very little more of the red gum.

Medical advice, in this disease, is seldom necessary; and medicine never — I mean if the child is properly taken care of. The application of cold water, when the child has never before been accustomed to it, or even of currents of very cold air, should by all means be avoided. Caution, however, should be used, not to carry this advice to the extreme of watching, with fearful anxiety, against every breath of pure, free air; for nothing can be more salutary, or even more indispensable, in the disease, than atmospheric purity.

If the child has been accustomed to cold water, even the sponge bath may, by possibility, be useful. It certainly will be so, if it is accompanied, or rather followed, by a glow of warmth; for this is the test of usefulness. Washing with warm water, once a

day, in this complaint, is, I believe, always indispensable, and almost always agreeable.

The greatest possible attention, moreover, should be paid by the mother to her diet, and to that of the child, whenever it occurs in a child who is old enough to receive any other food than milk. Fruits, in such circumstances,* should be used, if used at all, with very great caution, even the best and most perfect of them. A great mistake prevails in regard to the ease with which fruits are digested by children. It requires the strong, healthy stomach of adult life, or at least of later youth, to digest most fruits without great difficulty. Above all else, whatever may be the age of the child, and the quality of his food, avoid excess in quantity.†

I have said that medicine, in the red gum, is seldom necessary. Costiveness, indeed, sometimes prevails, which is sure to continue or aggravate the complaint, and should therefore be obviated in the mildest way possible. Perhaps a mild injection will be sufficient, with a change of diet, when such a change has become necessary. If the eruption should be repelled from the surface — *driven in*, as

* The child will seldom be old enough to desire these; and yet so fond are many mothers of giving it fruits, even at this tender age, that the caution I have given is not wholly without its use.

† Professor Ives, of New Haven, in his lectures to medical students, is accustomed to speak of an anomalous case resembling red gum, which was cured, as he says, by vegetable food, mild acids, and riding abroad in the open air.

it is commonly expressed — the warm bath should immediately be used, and the child should subsequently be wrapped up in warm flannel, and in general kept as warm as is compatible with health. Beyond these, all, I think, should be left to the physician.

White Gum.

This disease, though acknowledged to be seldom seen among us, yet receives a good deal of attention from some of our most able writers on infantile diseases. It consists of numerous very small, hard, whitish specks, a little raised above the level of the skin, and surrounded by a slight redness. They appear chiefly on the face, neck, and breast.

Like the red gum, this complaint requires no medicine, except when, by means of cold or some other agent, it has been suddenly repelled. In such a case, the immediate use of the warm bath will be advisable.

Its causes are similar to those which produce red gum, and point to the same necessity of pure air, proper food and temperature, as well as a particular regard to cleanliness. On this last point, medical men are entirely united in opinion. Cleanliness is the universal prescription; and with some, almost the

only one. The whole body should be thoroughly cleansed of all its impurities, at least once a day.

Ulceration of the Mouth.

I WISH to notice, under this head, two very different affections. The first is simply an ulceration of the mouth, and may make its attacks at any age, though it is most apt to be troublesome at a very early period. The other is a disease of the gums arising usually from cutting the last of the first set of teeth, though it is occasionally connected with the appearance of the first of the second set.

The first species of ulceration of the mouth is generally caused by improper food; and, though easily *prevented*, is rarely cured without medicine.* Nevertheless it is not so dangerous as it is troublesome; so that ample time is given to call in a physician.

It usually begins by a small, inflamed point of the string or frænum of the tongue; but it soon and rapidly extends itself along the loose substance by means of which the under side of the tongue is connected with the mouth, and finally to the cheeks and gums. It rarely affects the tongue itself. "The

* It may be regarded as the sequel of the lighter and less troublesome disease, which has been described at page 44.

edges of the sores," says Dr. Dewees, whose description of it is the best I have seen, "are generally pretty high, and much inflamed, and the ulceration deep in proportion to its surface."

In the early stages of the complaint, the child is apt to be fretful and uneasy, and to slaver much; and there is usually some fever, with costiveness. As soon as these symptoms appear, those who are not willing to trust the disease wholly to nature should seek for medical aid, not because there is *danger* from delay, but because it is a complaint which few mothers will be likely to mitigate by their own treatment, or by the specifics of their equally uninformed neighbors. Whether, however, the case is, or is not, left to nature, a change of air will be highly desirable.

The second form of the complaint is apt to be most troublesome, when it is connected with the sudden and simultaneous appearance of a number of the back teeth. The first symptom is a disposition to pick the mouth, cheeks, or gums. These last at length become swollen, dark-colored, and spongy, and bleed with great readiness; the child slavers much, its breath is offensive, and there is more or less difficulty in swallowing. Finally, according to some writers — for there is a difference among authors on this point — if let alone, they become gangrenous or mortified. Indeed, the complaint is called, by many, *aphthous gangrene.*

If the gums are cut on the first appearance of the symptoms, the disease is said to require little if any further treatment, and the patient will, in due time, recover. But whatever is done needs to be done professionally; mothers are, for the most part, as wholly unprepared for its management, as when it appears in the form before mentioned.

Erysipelas.

Almost as soon as children are born, they become more or less liable to the terrible disease usually called erysipelas. Happily, it is not so common in our own country as in many others; and is every year becoming more and more unfrequent.

It usually makes its attacks upon the face, the neck, the small part of the back — the loins rather — and the region of the seat. The disease commences, for the most part, by pale red spots, not unlike the sting of a wasp or bee, with a purplish edge. The child is almost always feverish, and apparently in great pain.

The inflammation is sometimes so rapid and violent that the disease completes its course in a very few hours. In other instances, it runs on moderately for several days, and if it does not ultimately prove fatal, becomes, at least, very difficult of management.

On the appearance of the pale-red spots which I have mentioned, we should either make up our minds to trust the case to nature, or call in a medical man at once. It is not well to wait till small blisters begin to show themselves among the spots, for on the appearance of the blisters, the disease usually proceeds to its termination, with a fearful rapidity; and if nature is not strong enough to bear up under the most severe trial, the patient will die. No medicine, in any event, will avail any thing.

In respect to this disease, above almost all others, it is in vain to attempt to instruct the inexperienced, by a work like this, any further than to enable them to distinguish it, and to perceive the danger that threatens, and to prevent it in time to come. The most which the mother can do, without medical advice, — I speak now with reference to the disease when it assails the infant at the breast, — is to take good care of herself. Nursing mothers, and nursing women who are not the mothers of the children they nurse, have very little conception how much they can do for the children who derive their support from their bosoms; and how little, to any purpose, they can do beyond that. This remark is applicable gen erally, but especially to the disease which we are considering.

Flatulence.

By flatulence is here meant that state of the stomach and intestinal canal which favors the production and accumulation of gases,* of various kinds, in those parts or cavities. There may be every degree of this complaint, from a slight deviation from the line of health to a state of things which is highly distressing, if not in some instances positively alarming.

So common is flatulence — a greater or less degree of it — among the laboring classes of the community, that they are often known to regard it, in men or domestic animals, as a sign of firm health. Or, rather, they seem to take for granted that there is, of necessity, a greater or less amount of gas always present in the stomach and bowels, and that the health of the individual may be measured by the power which he possesses of expelling it.

Can it be necessary to say that this is an utter mistake? and that in a state of perfect digestion there could be no gas, and consequently no flatulence? Yet such is the fact, most unquestionably. The production of gas or wind in the stomach, or in any other part of the system, is the result of some chemical action or change. But in a state of perfect

* Various gases accumulate in the stomach and intestines, but the worst of all is what chemists call *sulphurated hydrogen gas.*

integrity of the functions of the human body, there can be no purely chemical changes. The functional processes are vital processes, as distinct from the processes of chemistry, as these last are from those of simple attraction. And every schoolboy knows, or should know, how entirely different chemical attraction or affinity is from the more simple attractions of cohesion and gravitation.

Beyond the domain of the vital powers, that is, out of the body, all the various kinds of food which we use, whether animal or vegetable, have a tendency to decay.* But decay always involves fermentation; and it is chiefly in a state of fermentation that any substance can evolve gases.

Now, if the food, drink, &c., which are received into the human stomach, are in proper quantity, quality, and condition, and if the stomach also is in a perfect condition, they come immediately under a set of laws, with which neither chemistry nor natural philosophy has any thing to do. In other words, all the tendencies of this food to obey the laws of cohesion and affinity give way; and the substances in the stomach yield to the laws of vitality There neither is, nor can be, any such thing as fer-

* Mineral substances, such as salt, clay, &c., though often eaten, can hardly be called food, since we are without proof that they ever afford us, in any case, a particle of nourishment; so that these substances form no exception to the rule I have advanced.

mentation, nor, strictly speaking, as attraction or cohesion. Or, at any rate, there is such a perfect submission of the substances present in the stomach to a new set of laws — the vital laws — as to a new sovereign or ruler, that none of the phenomena of chemical or philosophical law can be manifested.

So it is, in fact, with any other organ of the animal economy. The moment air is received into the perfectly healthy lungs, and brought fairly within the sway of vitality, that moment the peculiar set of laws by which it was governed while out of the body is, as it were, repealed; and it becomes subject to that code of law which is peculiar to the vital domain. I do not mean, by this, that chemical law in digestion or respiration is entirely suspended, but only that it so gives place to other law that its own peculiar character cannot, and does not, appear.

When, therefore, we find the law of fermentation in active operation in the slightest degree, within the animal domain, we may be sure there is some existing fault or defect. The evil may — probably must — have its origin in one of three things. The food must be wrong, or the digestive powers in fault, or some other organ, or set of organs, must be disturbed, with which the digestive powers sympathize.

This explanation of vital law has been deemed necessary, in order to show more fully, to mothers, the nature and causes of flatulence. And if what I have

said is said intelligibly, it cannot but be seen, not only that every degree of flatulence is disease, but also that it arises from a state of things which cannot be improved, at once, by medicine. I say *at once;* because the more general belief is, that wind in the stomach arises from some local cause, and therefore needs a local remedy; and hence the whole tribe of what are called carminatives, or, in other words, wind medicines. Whereas, when we come to know that flatulence arises from a more general cause, viz., from weakness of the whole digestive system, induced by some cause applied to itself, or by sympathy, we shall be more ready and willing to hearken to the only true and rational advice with regard to treatment.

Let us now examine the usual practice of mothers and nurses, in cases of flatulence, in the light of these views and principles.

When an infant cries, and gives evidence of flatulence, the mother's thoughts are at once directed, not to the cause, but to a remedy; whereas the first thing should be to ascertain the cause of the disease, and, if possible, to remove that.

If this were the course usually pursued, how seldom should we find mothers, nurses, and ignorant physicians, giving to children, only a few weeks or a few days old, large quantities of sweetened water, and tea of ginger and aromatic seeds, and perhaps of rhubarb, with the intention of expelling the wind,

as it is termed; as if they supposed that to expel the wind already present in the stomach, were to cure the disease!

The first question which ought to be asked, when we have evidence of flatulence in an infant, or even when we suspect it, is, to inquire whether its food and the food of the mother are such as they should be, and of the right quantity. If the food should appear to be right as to quality, there may still be error in regard to quantity. If a child's stomach is overloaded, the vital powers flag, and chemical law comes in, and the consequence is, a degree of fermentation, by which means either gases or acids are formed. And if gases are formed, and the child has not, by nature, a very strong stomach, so as to be able to throw them off, there will, of course, be distention and pain.

There is reason for believing that the stomachs of most children are naturally strong. If there be such a thing as inheriting a weak stomach, it must occur, I am sure, but very rarely. Were it not so, children would be troubled with flatulence a thousand times as often as they now are. Most mothers are certainly in the habit of abusing their stomachs, either by the quantity or the quality of their food, or both. It is impossible for nursing mothers to be eating or drinking at all hours, and giving their stomachs no rest, without its affecting their children. It is impossible for them to eat freely of crude,

watery vegetables, or oily, salt, or acrid * substances, without its affecting their children. Nay, it is impossible for them to eat too freely of the most wholesome food, without involving themselves in the same danger. And yet it is surprising to observe how seldom the children of such parents appear to suffer from flatulence. The same Divine Providence that visits the iniquities of parents, in a great many instances, upon children, has so ordered it, that the stomachs of most infants will suffer long, ere they give out, or even complain.

When, however, parental transgression is of so heinous a nature as to impose upon the child (what I suppose but seldom happens) a weak digestive system, the suffering from maternal error in regard to diet is more immediate, as well as more severe. The vital energies are so feeble that the chemical laws continually interfere; gases are very frequently evolved; and the child becomes an habitual sufferer. There are some children who never digest a meal without pain.

The condition of flatulent children is one which calls for our strongest sympathy, as well as our highest wisdom. They are in pain from gases or acids, or both; and what shall we do? Custom, among nurses, as well as among the more ignorant of our physicians, says, Expel the wind by aromatic

* *Acrid*, sharp, biting.

drink of some sort. Such drink is accordingly given. A foreign foe — a new cause of suffering, in itself considered — is now to be contended with, and the already crippled stomach would be crippled still more, were it not that it summons to its aid the vital energies from other parts, and succeeds in expelling, rather unceremoniously, the new comer, and, in some cases, a portion of the gas. The expulsion of the gas inspires us with courage, and we rejoice at our success. Besides, being employed in the preparation and administration of the medicine, our thoughts are withdrawn, in some degree, from the suffering which is undergone; and if the medicine does not compose and relieve the child, it relieves *us*.

But the child *is* relieved for the present. Not, however, without future injury to the general system; so that, should the same causes again operate, his suffering will be greater than it was before he took the medicine. For his stomach is not only weakened, but its lining membrane is made more tender, and more susceptible of irritation.*

I have admitted that, somehow or other, amid the contest of the digestive powers, not only with gas, but with medicine, the child often finds relief. Not *always*, however. Where the vital energies are so much reduced as to permit gases or acidities to

* How long will it be ere we shall be wise enough to study out and prevent disease, by avoiding its causes, instead of relying so much on temporary remedies ?

collect, the presence of sweetened water or ginger tea will sometimes increase the debility; and, instead of being disposed of by the stomach or absorbents,* it will, of itself, run into fermentation, and cause new trouble; though even here the mother often boasts of her success, especially if her child is strong enough to eructate well. To multitudes, in their ignorance, the discharge of wind is as music; never dreaming that it is caused by their own dosing, and is preceded by pain of their own manufacturing.

Thousands of children, who cry with pain from gas in their stomachs or bowels, would get over it as quickly, and with a far more healthy state of the lining membrane, and a greatly diminished liability to future recurrence of flatulence or other disease, if nothing at all were given. Would we wait, with patience, for Nature to do her work, as long time as we spend in getting ready the medicine and waiting for its effects, there would be, five times in ten, less suffering in the *present*, and nine times in ten less *future* suffering.

But if dosing with aromatic or warming teas is not to be recommended, what shall be said of dosing a child, every time it raises a little wind, with rhubarb, magnesia, and ipecacuanha?

One foreign writer says, "Give twenty grains of

* *Absorbents*, vessels which absorb, or suck up.

magnesia, with ten grains of rhubarb, in peppermint tea, when the child is costive. If there is any indication of a foul stomach, it will be proper to give five grains of ipecacuanha, as an emetic." But is it forgotten that there are almost always such symptoms present as will be construed by an anxious, ignorant mother into signs of a foul stomach? and that, by consequence, the emetic will almost always be given, by those who place any confidence at all in the prescription?

In reference to this advice, however, the American editor of the work alluded to has added, in a note, the following judicious and well-timed remarks. I say *well-timed*, though they will not be much regarded. The text will principally be heeded; while the notes will be overlooked or forgotten.

"We object to the free use which our author makes of ipecacuanha; there is danger of its inducing too much debility; and, certainly, the frequent resort to emetics and cathartics, on all occasions of infantile indisposition, will not only enfeeble the child, but lay the foundation of many ills in adult life."

Buchan, in his "Domestic Medicine," in speaking of this complaint, observes, "Such medicines ought to be used as have a tendency to expel wind, and, by strengthening the alimentary canal, to prevent its being produced there." This advice is more sensible than that of some other writers; but it

would be difficult to find any thing in the list of what is properly called medicine, which can accomplish the end here proposed. The same author immediately adds, however, that many people find great benefit from eating a dry biscuit, especially when the stomach is empty. "I look upon this," he says, "as one of the best carminative medicines; and would recommend it in all complaints of the stomach arising from flatulence, indigestion, &c."

The general idea which is inculcated in this remark about the dry biscuit, is of the highest importance. Infants of a few weeks old cannot, of course, eat dry bread or biscuit; but the great aim should be to see that their food is as simple and inoffensive as a piece of dry bread or biscuit is to an adult. And this, in my own view, is the great secret, in the art of treating flatulence. Let it be the study of the mother to have the child's food as perfect as may be, and in as small a quantity as will barely suffice to nourish it; and then, if all its other habits are good, there is reason to believe that, except in cases of very great constitutional debility of the nervous system or the stomach, the flatulence will gradually disappear, and the child's digestive powers ere long become invigorated.

I have dwelt on this disease — if that which is by far the most part symptomatic of other diseases, is worthy of the name — at such length, because I know of no particular point in regard to which there

is more or greater parental error. If what I have said, however, should be a means of banishing medicine in cases of mere flatulence, I shall greatly rejoice. For I have witnessed so much of suffering from dosing in this complaint, that I must be allowed here to enter my protest wholly against it; and to insist that there is a more excellent as well as a more merciful method of treatment — the treatment of prevention.

Acidity.

Acidity, like flatulence, is seldom treated of as a disease by itself, because it is usually a mere symptom of other diseases. On this principle, however, we might go on to exclude costiveness, diarrhœa, and vomiting; for these are often symptomatic of other diseases. Yet, as nearly every writer on children's diseases has retained the latter in his list, I must be permitted to retain the former.

Strong as the stomachs of most children seem to be at birth, they either become weakened, in the course of a few years, or else we make sad errors in the selection or preparation of their diet, and in their other physical habits; for what is only occasional in early infancy — I mean acidity and flatulence — frequently becomes, in after years, almost or quite habitual. Especially is this true of acidity.

Most of the food which children take seems to incline, rapidly, to acidity; * of which we have evidence in the flatulence mentioned in the preceding pages, and the frequent appearance of green evacuations from the bowels, attended with a sour smell, and sometimes with gripings.

The fact that there is such a tendency in the young to acidity leads many to suppose that nature has provided an acid in the bowels, and that it is only when this exists in superabundance, that it induces disease. But the idea of an acid, either formed in the bowels or natural to them, is evidently fallacious. Nor is it true (such, at least, is my own belief) that there is a tendency to acidity in infancy and childhood, more than at any other age, were parents duly instructed in the laws of life and health, and careful to obey them.

In the first place, their food should be adapted to their age and strength. It should neither be wrong in point of quality nor excessive in quantity. In a word, every thing which has been said, on this subject, in the section on flatulence, is applicable to acidity. What induces the one, for the most part, favors the other.

Milk is the natural food of the young. Of this there cannot be a reasonable doubt. As they

* It has this tendency in proportion to the inability of their stomachs to digest difficult things, whether this inability is born with them or acquired.

emerge into childhood, farinaceous food is substituted, at least in part; such as bread, rice, plain puddings, boiled grain, and at length potatoes.

No dietetic error can be greater than that of feeding children, as soon as they have teeth, with such food as we, their seniors, use. Whether done wholly for the sake of convenience, or partly because we have a confused notion that they must needs like what *we* like, the practice is reprehensible.

Some writers have endeavored to discourage the free use of bread in infancy and childhood. In a note to Buchan's "Domestic Medicine" — I know not by whom it is written — we are gravely told that much of the acidity of the stomach of children arises from the too free use of fermented bread. And Dr. B. himself, in some parts of his work, expresses his fears that people eat too much bread.

Now, I do not believe a reasonable use of bread, whether fermented or unfermented, if prepared and received in a proper manner, and under proper circumstances, will ever, in the young or the old, induce acidity and flatulence. More people suffer for want of a suitable proportion of good bread than from an excessive use of it. Or, if this should be doubted, we may at least be safe in saying that more people suffer because they do not eat a larger *proportion* of bread with their meals than because the proportion is too great.

Milk, then, I say, is the first and most natural food

of mankind; and farinaceous substances should only be introduced to them gradually. First a small piece of bread once a day; then a small piece twice a day; then gradually increasing the quantity, and of course somewhat diminishing the milk, though not with the same rapidity. If they can masticate it, and seem disposed to do it, bread *crust* is the best for them; but if not, give them soft bread, such as will not greatly irritate when it happens to be swallowed without much chewing.

The reason why bread is supposed to induce — and sometimes does actually induce — acidity, is because it is almost always used in an improper manner. It is eaten hot — new — soaked — toasted — buttered — sweetened, and between meals. It is also salted; or if raised, is apt to be a little acid, or to contain too much sal eratus or pearlash. Or, if nothing else were wrong, it is apt to be made of fine flour, which forms a paste in the stomach, and, being in that state rather indigestible, tends rapidly to fermentation.

There is no strong objection to a little fine flour bread, if of suitable age and eaten alone; but bread which is either salt or acid — and a large proportion of the bread which is eaten in this country is both salt and acid — is decidedly objectionable. There is no occasion for wonder if such bread, in infancy and childhood, should be found to tend to acidity. But train the young, by degrees, to coarse bread of suit-

able age, eaten alone, and well masticated — not toasted, soaked, or buttered — and if, in these circumstances, and with the addition of some milk and a little boiled rice, there should still be acidity, we may at least conclude it to be owing to some other cause than the diet.

I have said that there is no greater dietetic error abroad in our community, than that of feeding children, as early as possible, with such food as we ourselves eat. Nothing can be more foreign to the intentions of the Author of nature respecting us; and I am fully confident that it is to this error we are entirely indebted for some of our children's diseases; while almost all are aggravated and rendered more fatal by it.

Among the particulars in which we err is that of giving fruit to very young children, or at least of allowing them to eat as much as they please of it. I do not believe that milk and acid fruits should be eaten at the same meal; and therefore, as long as milk ought to be a component part of children's meals, I do not see how they can well use much fruit. Besides, fruit is more difficult of digestion than most people are aware. It is only when milk at our meals — some one or more of them — begins to be dispensed with, that fruit should be introduced; and even then it should be done with great caution. The juices of fruits are the milk of adult life, as the food which nature has prepared for us, together with

the product of the goat and cow, are that of infancy and childhood.

In the second place, we err when we teach children to drink too much. There can be no doubt that, with many children, the less they drink of any thing, the less they are disposed to acidity, flatulence, and diarrhœa. What they drink should, indeed, be water; but if their food is such as it should be, and their other habits are correct, they will scarcely need any drink once in a week. Hot drink, above all, should be avoided. When I see so many young children scowl at hot drink, when first offered them, and then reflect on the general prejudice in its favor, I am often struck with the almost omnipotent power of habit. I will not say, with Dr. Lambe, of London, that man is not a drinking animal; but when I find that individuals who have been trained, to the age of forty or fifty, to drink from twelve to twenty times a day, not only at meals, but between them, can abstain from drinking any thing at all, three, six, and even nine months at a time, without perceptible injury, and almost without inconvenience; and this, too, though they use no milk, nor much of any other liquid or juicy food — fruits alone excepted — I am compelled to believe that the incessant demand, with many, for drink, is at best wholly arbitrary; and to *suspect*, with others, that much drinking is positively hurtful.

In the third place, acidity of the stomach and flat-

ulence — to say nothing at present of diarrhœa — are invited by the early use of medicine. This is one reason why I have insisted so strongly on getting along without it in aphtha, as well, in fact, as in all other infantile diseases. It is surprising to witness the recklessness of mankind on this subject. Even physicians are not wanting who tell us how well children will *bear* medicine. And yet the same physicians tell us how subject they are to acidity, flatulence, diarrhœa, &c. &c. ! Are these effects without causes ? May none of them be referred to the injury inflicted by medicine ?

Colic.

This is one of the diseases to which children are early liable, and may be regarded as of two kinds. First, we may consider it as liable to make its attacks at regular periods, or after regular intervals. Secondly, something may be said of that form of the disease which makes its attacks without reference to period.

Of the first kind, I have little to say. It makes many crying children ; and yet it not unfrequently happens that these same children look strong and healthy. It does not appear to affect, greatly, their

growth or vigor. Indeed, if the disease is let wholly alone, and proper pains are taken to strengthen the constitution by exercise in the open air, bathing, &c., it will generally, after a time, wear itself out.

And if any thing is done with direct reference to its removal, it is only by proper attention to diet and drink. Those medical men who treat it with most success only give a little manna, senna, or castor-oil, when costiveness is thought to be combined with it. To mothers I would say, Give nothing at all. If you have doubts, or wish to make inquiries in regard to diet and regimen, apply to the proper authorities; but otherwise it is better to leave all to nature.

The second and most common form of infantile colic afflicts children who are born with feeble constitutions. It is supposed, by the ablest writers on the subject, that the chief cause of this form of disease is either the want of a sufficient proportion of nourishment from the mother, or the reception of that which is of a bad character, or badly elaborated.* It has also, at times, had its origin in the indulgence of bad passions by the mother, especially anger.

It is not difficult to determine whether the colic is, or is not, caused by food which does not agree with it; for if it is so, there will be pain almost as soon as

* *Elaborated*, formed, as it were, with much labor or pains.

it is swallowed; or if from milk which is not good, as soon as the child has done nursing. The bowels are also liable to become enlarged and hard; and the child writhes its body, as if in the utmost agony.

When the complaint seems to arise wholly from indigestible substances of various kinds, the best way is to confine the little sufferer entirely to the mother's milk; but should it be traceable to the milk itself, the mother must change her diet, use more exercise, invigorate her body, cheer her mind, and govern her passions.

Parents, whose children are subject to colic, will sometimes be surprised to find the disease wholly disappear under an improvement of the physical habits of the child or the mother, or both. But should this result fail to follow, in a reasonable time — should the complaint continue to recur, at every slight occasion, and to become more and more severe in its attacks — it may be well to look to the wisdom of a profession whose office it is, and whose pleasure it should be, to render such advice, as greater study and experience have enabled it to impart.

Were parents, however, sufficiently informed with regard to the importance of having the mother regulate her own physical and mental habits, in reference to the well-being of the child she nurses, the colic of infancy, if not wholly prevented, might, in ninety-nine cases in a hundred, be very easily cured. It might be somewhat more difficult to overcome the

disease in later life; but even then, a wise reference to the habits of the individual would do much more than medicine.

Constipation, or Costiveness.

With some few children, costiveness appears to be constitutional. In other words, such is the tendency of the child's physical inheritance, that a measure of health may be maintained while carrying a load of disease, which, in other circumstances, the system would not long endure.

There is a liability to much mistake, however, in this matter, especially while a child is at the breast. Dr. Underwood, a distinguished writer on the diseases of children, says that the condition of a child, with respect to costiveness, will always correspond to the condition of the mother; and such, I have no doubt, is the general fact. But there are certainly some exceptions to this rule. When the costiveness of the parent is induced by diet, or want of exercise, or some other accidental circumstance — in other words, when it is not owing to permanent debility or derangement of the digestive apparatus or the bowels, and the child itself seems healthy — it is much less likely to keep pace with the condition of the mother than in other circumstances.

Dr. Dewees, for example, mentions the case of a

mother who was subject to diarrhœa during the whole period of nursing, whose child, of six months, was in one instance exceedingly costive. But there is no mystery in such a case as this. For, to say nothing of the tendency of the system to vibrate from the extreme of costiveness to that of relaxation, and *vice versa*,* the diarrhœa of the mother, mentioned by Dr. Dewees, was owing, without doubt, to a degree of constitutional debility of the bowels, which debility being ingrafted on the child, resulted in costiveness.

Dr. D. also speaks as if he had often known the mother continue costive from two to ten days, without any corresponding effects being produced on the child. But what then? His very language more than implies that costiveness finally came. Or, if it did not, we may very safely conclude that the mother's condition, in these cases, was accidental rather than constitutional.

But not to reason longer on this point — for even Dr. D. himself does not deny the general rule of Dr. Underwood — it must be obvious that there is danger of mistaking for a constitutional tendency of the child, that which is only temporarily induced by the condition of the mother. Great care, in any event, should be taken not to confound constitutional with accidental disease.

* *Vice versa*, a Latin phrase, meaning the reverse, or the contrary.

If the costiveness is constitutional, medicine must be avoided, at all hazards. What cannot be done by exercise, by bathing, by a bracing air, and by due attention to the habits of the mother, cannot be safely done at all. Let it be distinctly understood, however, that cases of what deserve the name of constitutional costiveness are, after all, exceedingly rare. For one of this sort, there are probably fifty, if not one hundred, which, by way of distinction, may be considered as accidental.

1. The first accidental cause of costiveness, which I shall mention, is the use of boiled milk. It is well known that children "brought up by hand," as it is called, are more subject to deranged digestion, costiveness, and relaxation, than those brought up at the breast. They are especially so when they use much boiled milk. The parent, then, who has a costive child, and is desirous of tracing out the causes of its costiveness, should first look well to its diet.

But it is not boiled milk alone that will produce costiveness. Rice and fine flour bread will have the same effect, if used too freely and too long. Not that either of these — nor even boiled milk itself — can have a directly astringent or constipating tendency. The effect which they produce is *indirect*, rather than *direct*. The fault with them is not so much that they act wrong, in any way, as that they do not act at all; at least with sufficient energy to produce the desired results.

2. Medicine is the second accidental source of costiveness, to which I shall allude. If mothers were half as ready to search out and remove the causes of their children's complaints as they are to send for a physician in every case of petty indisposition, it would be far better for their constitutions in after life, as well as save them much expense for medicine and attendance in the earlier years of infancy. For though I cannot have either part or lot in that general prejudice against medical men, which says they will induce or prolong disease for the sake of the emolument,* yet there cannot be a doubt that costiveness is often the result of an improper use of active medicine, whether administered by parents themselves or by physicians. It is painful, exceedingly so, to observe how frequently a mother will rejoice in the success of a prescription, when her very success paves the way to disease in some other form.

But it is less my object to complain, here, of the tendency of medicine which is unnecessarily employed by medical men (for what can we do when we send for them — I mean with safety — but follow out their prescriptions?) than of the danger of parental dosing and drugging, especially with elixir paregoric and laudanum. I know of no one who has com-

* Such villany, no doubt, has been practised; but it is wrong to charge it on the profession generally.

plained with more bitterness, or with more justice, of the use of the latter medicine, than Dr. Dewees.

"Nurses," says he, "are now so familiar with this drug, that it is as regularly carried about with them as their scissors or thimble, and is much more indispensable to their comfort than either of these emblems of industry. If the child do not go to sleep, or if it be even feared that it will not at the exact moment which will suit the arrangements of the nurse, — or if it cry from any cause, so as to give any additional trouble, — laudanum is given, to make 'assurance doubly sure.' The consequence is, that an accidental is converted into an habitual costiveness; or the child may fall a sacrifice to convulsions, or other fatal diseases, before this disposition of the bowels may be changed."

I do not think simple laudanum is so often given among us as elixir paregoric, or some other mixture.* I have seen a child eight months old attacked with epileptic fits, and almost destroyed by them, when the only cause which could be discovered — and was not this sufficient? — was the use, twice a day, of a mixture of thirty drops of laudanum with the same quantity of spirits of lavender.

It is true that I have seen a multitude of others —

* I do not, here, undertake to deny that it is very often given, even among us. You can hardly travel a day on a railroad or canal, or in a stage-coach or steamboat, without meeting with more or fewer mothers and infants with laudanum bottles.

children, no doubt, who inherited remarkably strong constitutions — whose mothers gave them elixir paregoric to keep them quiet, so that they themselves could work; and this without any perceptible ill effects, except costiveness: this, I believe, is always induced in a degree. Costiveness is less frequent, however, as well as less severe, than might be expected, did we remember how universally opium, in *some* of its forms, is administered.

3. "Costiveness is induced," says Dr. Buchan, "by keeping the body too warm, and by every thing that promotes the perspiration; as, wearing flannel, lying too long in bed, &c." If this is so — and I have not a doubt of it * — how careful ought mothers to be to watch against excess of heat in any of its forms! And they are called upon to watch against it with the more care on account of the great difficulty, at this tender age, of steering clear of extremes.

Infants have not the power of resisting either heat or cold as well as adults. Once heated, they seem

* The skin, and lining membrane of the intestines, are said, by physiologists, to *sympathize* strongly with each other. This is the reason why costiveness follows, so readily, when the skin is overheated. For, being overheated, it falls into a state of debility, and consequent inaction; in which, from sympathy, the lining membrane of the bowels soon partakes. But inactivity of this membrane is sure to be followed, sooner or later, either by diarrhœa or costiveness; sometimes by one, and then the other, alternately.

hotter, and once cooled, colder. Mothers ought to understand this fully, in order to prevent the error of allowing them, on the one hand, to be overheated, and, on the other, to be chilly or cold. Especially should they avoid the extreme of too much warmth; because this is an extreme against which they have not been accustomed to guard; and because it tends so certainly to costiveness, as well as a thousand other evils.

4. Too intense mental activity, in the young or the old, may induce or increase costiveness, or its opposite. Hence one reason why children whose powers of digestion are comparatively feeble should not be sent to school; * or, if taken with derangement of the digestive organs while at school, should, as soon as possible, be withdrawn.

5. One common cause of costiveness, in nursing infants, remains to be mentioned. The use of any thing which readily affects the liver may induce costiveness in the infant. First it may, indeed, as in the mother, excite too much intestinal activity; but this is apt, in both cases, to be followed, in a little time, by its opposite.

Among the substances which act upon the liver to produce the effects alluded to, are fermented and spirituous liquors, of every kind; tea, coffee, and

* I mean, of course, to those schools which make every thing of mere intellect. Wilderspin and Pestalozzi might have managed, with safety, such children as I am describing.

narcotic medicines; high-seasoned food and fat meats; too high a temperature, over-anxiety, melancholy, and anger.

The treatment of costiveness consists mainly, as I have already hinted, in removing its causes. When the cause is bad diet, either on the part of the mother or the child, let it of course be exchanged for a better. Those who are troubled with costiveness, ought, if possible, says Dr. Buchan, to remedy it by diet. "I never knew one," he adds, "get into the habit of taking medicine for keeping the body open, who could leave it off. In time, the custom becomes necessary, and generally ends in a total relaxation of the bowels, indigestion, loss of appetite, wasting of the strength, and death."

One of the most deceptive medicines I have ever seen used for the removal of costiveness is aloes. This, indeed, is seldom given alone; it is usually exhibited in the form of picra, elixir proprietatis, and the like. People are often deceived into the use of aloetic medicines, because, though they operate effectually, their action seems to be somewhat mild, (unless, indeed, in a very large dose,) not unlike that of the healthy intestines. But they seem to be ignorant of the fact that they have a very injurious effect on the liver, and thus tend to render habitual the very costiveness which it is intended to break up.

"When it is desirable," says Dr. Dewees, "to alter the costive condition of the bowels, as a habit, it is

always better to do it by diet than by medicine. Molasses, freely used, is excellent for this purpose; but the best remedy we have yet met with is a mush made by boiling a small quantity at a time of the unbolted wheat meal in water, and straining it through a sieve, while hot. It will be perceived that this must be made thin. A portion of it must be used in the milk the child takes, and it may be fed with it a little sweetened, two or three, or more times a day, or more seldom, as the case may require. When this is properly attended to, we have never seen it fail."

This recommendation is believed to be far more in accordance with the laws of life and health than that of one of the ancients, who directs to the use of animal oils, as flesh, butter, cream, marrow, fat, broths, — especially those made of the internal parts of animals — the liver, heart, midriff, &c. He likewise recommends the expressed oils of mild vegetables, as olives, almonds, pistachios, and the fruits themselves; all oily and mild fruits, as figs; decoctions of mealy vegetables, &c. Nearly all these things, except the last-mentioned class, I believe to be, in the end, positively injurious. Nor do I believe that *decoctions* of mealy vegetables are so good, in general, as the same amount of *the vegetable itself*, given in a *solid form.*

One thing should be mentioned, in speaking of the diet proper in constipation. In children, espe-

cially young children, warmth is a natural and healthful stimulus to the stomach and bowels. Great care, therefore, should be taken to have whatever is given them of a temperature but little, if at all, below the natural temperature of the stomach, which, in the healthy child, varies from 96° to 100°. It is said by Dr. Buchan, that a long-continued use of cold, insipid food will induce costiveness; but I am not aware that this opinion is corroborated by any other writer. Still I am sure that a *degree* of warmth is highly favorable, especially in the case of liquids; and therefore do not hesitate to recommend it.

Swelling of the Breasts.

"It occasionally happens," says Dr. Dewees, "that children newly born are found to have their breasts swollen, and evidently inflamed. This exists in various degrees, from a slight tumefaction to one that threatens suppuration."

In regard to the cause of this appearance at a very tender age, not only Dr. D., but the whole medical world, is involved in ignorance. It is, indeed, well known how the evil is often magnified by the mismanagement of ignorant and officious mothers and nurses; and it is principally to prevent any such mismanagement that I have introduced and de-

scribed the disease. For if left to itself, it will usually disappear in a short time, without the slightest necessity of any interference.

Or, if the swellings should be large, and there should be a good deal of inflammation, &c., and a physician should be sent for, the most he will probably attempt to do — at least if he is a man of good sense and experience — will be to apply a warm bread and milk poultice, and renew it every two or three hours.

I have never seen a case of this sort, and therefore depend for information wholly upon other writers Neither do I suppose it often appears. Nevertheless, we have the best of testimony that it is seen occasionally; so that it is desirable to put mothers and nurses in possession of what is known respecting it. One caution is particularly necessary, — not to press the tender and inflamed parts. There is a vulgar opinion abroad that these enlargements proceed from a quantity, greater or less, of milk, strayed, as it were, into the infantile breasts; and in consequence of such a belief, it has been common to press the parts, in order, if possible, to remove it. Now, let every one remember that whatever may hereafter be found to cause the disease, it is not the accumulation of milk in the breasts; and that even if it were so, such efforts to remove it, instead of relieving the child, only serve to aggravate and prolong the disease.

Teething, or Dentition.

This process is an institution of nature, and, were it not for our errors, constitutional and acquired, would be attended with very little suffering. Indeed, the most healthy and vigorous of the more healthy and vigorous families in country places, pass through the several stages of dentition, not only without medical advice or aid, but almost without the notice of the parents. As the world now is, however, involved in the consequences of physical transgression, teething is so often attended with troublesome symptoms as to merit a particular consideration.

Teething commences, say some authors, at about the age of four months. Such authors, however, could not have written for our climate and habits — I mean the climate and habits of the United States — for here I am sure it seldom commences before the age of six months. I have known but a single instance of teething at four months, and only one at four and a half; nor are those of five months, or even of five and a half, very frequent.

The teeth, at first, are mere lumps of jelly; though they are usually found ossified,* in some degree, at birth. Both sets, the first and second, appear to be born with us. They are, however, contained in

* *Ossified*, changed into bone.

separate apartments and sockets; the second set being deeper in the jaw than the first.

About the sixth or seventh month, some of the first set are found to have advanced so far towards the surface or edge of the gums as to cause redness and swelling. Not, indeed, all of them, or any considerable number. Often but one appears at a time; and in general only two, at most. The middle teeth of the lower jaw, usually called the *incisors*, appear first, though it must be confessed that this is not always the case; for there is, after all, a good deal of irregularity in this matter.

The tooth, before its appearance, is incased in a thin membrane, full of vessels and highly sensible. The pain of inflammation which accompanies dentition, is said, by some, to be caused by the tooth growing too fast for its membranous case, which puts it upon the stretch. The surrounding parts of the jaw are also pressed and irritated in the same way. Perhaps there may be something in this view of the case. I believe, however, that, if both parents and children were strong and healthy, the membrane would give way, as fast as the teeth would enlarge.*

* Let me not lead the reader into error. This membrane does not give way, by bursting, as the shell of an egg does, to let the chick pass. As soon as the tooth begins to compress the parts around it, the absorbent vessels become very active, and carry off the membrane — consume it, as it were — very rapidly. It is want of activity in these absorbents that occasions the troubles of dentition.

No man, so far as I am acquainted, has described the symptoms of dentition or teething as well as Dr. Dewees. As it is important, in more respects than one, that mothers should be correctly informed on this subject, I trust I shall be pardoned for giving his account of the process, in his own words; premising that the symptoms which he describes do not always make their appearance in the order he mentions. In some cases, only one or two of them appear together — and even these are much more moderate than Dr. D. has represented them — and at others, as I have already observed, there is scarcely any trouble at all.

"First. One of the first signs observed in a child about to cut a tooth, is heat in its mouth, which is distinctly perceived by the delicate and sensible nipple of the mother. This heat produces thirst, and makes the child demand the breast more frequently than before. An itching, most probably, accompanies this condition of the gum; as the child, with a view to relieve it, seizes the nipple, and strips it frequently by pressing its little jaws close upon it: it also rubs its mouth with its fingers, and presses upon every substance offered to its gums, however hard that substance may be. In proportion as a child acquires age before it cuts a tooth, is this disposition to press upon any thing placed between its jaws; hence the mother is often made to suffer by severe pressure upon the nipple.

"Secondly. A slavering, or a slight salivation, almost constantly accompanies this condition of the gums, and seems intended for four distinct purposes — first, to diminish, by this discharge, the inflammation and irritation of the gums; secondly, to moderate the thirst consequent upon this local inflammation, as the child is observed to demand the breast less frequently, after this takes place; thirdly, to supply an additional quantity of saliva, with a view to assist digestion, as the stomach and bowels are apt to become disordered by too much food, or by its remaining too long undigested — hence children who slaver much, are more rarely affected with bowel complaints, than those who do not run at the mouth; fourthly, it serves as an evacuant, thereby abating the general vigor of the arterial system, which, too frequently, is roused into inordinate action by the process of teething.

"Thirdly. After these symptoms have continued a longer or a shorter time, the gum is observed to become redder, a little swelled, and immediately over the points at which the teeth are about to issue, we may frequently observe, in the lower jaw, the parts to be semi-transparent; these points are small cells, and very often contain a little effused serum between the edges of the teeth and the external covering of the gum. At these points, we may also observe the thread-like ridge to be effaced, which mounts the centres of the gums, before any swelling

takes place, and the teeth, soon after, pierce the gum.

"Fourthly. The membrane lining the nostrils very often becomes sympathetically affected; hence the frequent rubbings of the nose, even to abrasion, sneezing, &c.

"Fifthly. Fever of a slight kind is very often provoked. This shows itself by heated palms; highly-colored, and oftentimes offensive urine; flushing of the cheeks, (frequently, however, but one at a time;) great dryness of the lips, and heaviness of the eyes.

"Sixthly. If several teeth are about to appear together; if the absorption of the gums does not proceed regularly; and if the system be naturally irritable — we find the salivation either excessive or nearly arrested; the gums, too, become much swollen, very red, somewhat spongy, and extremely sensible; fever even excessive at times; the kidneys furnishing much urine; leucorrhea in females; impatience, fretfulness, frightful dreams, startings in sleep; laughing or whimpering while dozing; diarrhœa, more or less violent; swelling of the submaxillary glands; sore or tender eyes, and convulsions."

One thing deserves notice in this place. I have shown that the teeth, in cutting, do not force themselves through the gums, mechanically. And yet people seem to act as if they thought this was the

fact. It is on this account that hard substances, for the child to hold and bite, have been so much praised — such as coral, gold rings, smooth pieces of ivory, &c. Something of this sort may indeed be useful, but not in the way usually supposed. Besides, a flat substance, such as a smooth piece of ivory, or a piece of India rubber, is better than any thing which presents only a narrow surface for the gums to rest upon. There is, after all, nothing better for the purpose we are considering, than to rub the gums, often and freely, with the finger; especially the finger of a person who labors hard, in whom the cuticle is fully and largely developed.

As to cutting the gums, I shall say nothing to mothers, for I do not consider it as belonging, at present, to their department. I will only observe that the fear of having them cut, lest, if the teeth should *not* appear, and a cicatrix or seam should be formed, it might obstruct their future passage, is wholly groundless; for the substance of the seam is more easily absorbed than the original membrane. So far, therefore, as this circumstance has any weight, to entitle it to our consideration, it is in favor of using the lancet. Still I do not believe the lancet to be often necessary.

I have spoken of the symptoms of dentition in such a way as, by possibility, to lead some persons to the conclusion that they appear exclusively, or almost exclusively, in connection with the two front under

teeth. But this is not so. It was necessary to present a full list of the symptoms somewhere, and accordingly I chose to present them in that particular connection. True, they are rather more closely connected with the *first* teeth; but they may appear in connection with any of them, especially when several make their appearance at once.

In a few weeks after the appearance of the lower incisors, the upper ones begin to show themselves. The lower canine or dog teeth come next; then the two upper ones, and finally the grinders, in the same order. There is, however, I repeat, a good deal of irregularity in this respect, especially among the more feeble children.

The third and fourth incisors of the upper jaw sometimes appear at once, and prior to the appearance of any teeth in the lower jaw but the first two incisors. The whole number of the first teeth is twenty, viz., four incisors, two canine teeth, and four grinders, in each jaw; and they are all cut, as a general rule, before the end of the third year.

The first set, however excellent, are never so good as the second. They are very apt to decay, especially in children who are scrofulous, or in any other respects tender or delicate. If the child, in consequence of its feeble hold on life, has suffered much from sickness, and has taken much medicine, particularly active medicine, it is not uncommon to charge the blackness or early decay

of the teeth to the medicine which has been taken. Calomel, in particular, comes in for a very large share of the blame.

Now, while I have no very strong desire to exculpate from blame this very "naughty drug," I am fully confident of one thing, — that the continual abuse of the laws of health on the part of parents, from their youth up, and especially on the part of the mother, both before and during the period of nursing, has much more to do with the early decay of the deciduous * teeth than calomel. True it is, that, with all the care which can be taken, they will fall out about the seventh year — for this is the course of nature — but it does not follow that, in order to get rid of them, there must be caries or pain.

Let me not be understood as encouraging in parents a total neglect of this whole subject; for to do so would be to add a second error to the first. Whatever may be true in regard to the necessity of decay, and caries, and pain, most parents have already so managed, and their ancestors before them, that suffering will come to their children. Be it then their duty — and let every parent feel it to be a pleasure as well as a duty — to make this only atonement for transgression which remains in their power.

Let the parents watch, from time to time, the progress of the caries, and not only keep the stumps

* *Deciduous,* falling.

as clean as the nature of the case will admit, but also see that, by remaining too long, they do not occasion serious inconvenience. It is a great favor to reside near a dentist, in whom we have confidence, especially at the time when the second crop of teeth are expected to protrude. Indeed, a state of society is greatly to be desired, in which every parent could afford to call in a dentist to examine the teeth of his household, at least once a year, if not once in six months. It is no trifling matter to have the gums of a child inflame and suppurate, and to have gum-boils form; and especially to have the second or permanent set of teeth protrude in a wrong direction, or in a wrong place.

But I am anticipating. There are numerous diseases connected with, or dependent upon, teething. These are more particularly such diseases as attack the skin; among which Dr. Dewees reckons red gum, white gum, and several other tooth rashes, as they are called, sore ears, and crusta lactea. The former two have been described, though, in my own view, they have little to do with teething; the latter two will be described presently.

There is another and much larger class of diseases, which, though not often induced, are greatly aggravated by teething. Such, among the more active diseases, are fever, dysentery, diarrhœa, cholera infantum, &c. Such, too, among chronic complaints, are scrofula, rickets, consumption, and that debility

of the first passages* which favors the production of worms. Whatever disorders are liable, in their progress, to disturb the natural functions of the alimentary canal, are almost sure to be aggravated, more or less, by teething.

Still it is thought, by the more recent writers on this subject, that the mortality of early infancy from teething has been greatly exaggerated. For, though many children die at this period, it must not be forgotten that they may, and often do, fall a sacrifice to other complaints besides teething. I do not believe that one child in every six dies from teething directly, as some have represented it. Such, most certainly, is not the case in New England.

Dr. Dewees, while he insists that, as a general rule, "children of the finest constitutions cut their teeth the earliest and the easiest," admits that there are exceptions to the rule, and even indulges a suspicion that they are the more exposed, on the same account, to fever and other diseases of irritation. This last I believe to be a suspicion merely; for it would be very strange indeed if facts should be found to substantiate it. He adds, however, one caution, which strongly corroborates the suggestions I have made repeatedly, but which can hardly be too often repeated.

* *First passages,* the alimentary canal, including, of course, the stomach.

"Much of the difficulty," says he, "that attends painful dentition, may be removed by a proper attention to air, exercise, food, bowels, &c.; for, if these be duly regarded, the system will be less disposed to morbid action, even though the local symptoms — such as swelling, redness, and inflammation of the gums — should be considerable."

It is truly surprising to how great an extent medical men, in their writings, admit the influence, in almost every disease, of what they call the *non-naturals*, (which, however, were far more properly called the *naturals*,) — I mean temperature, air, exercise, dress, sleep, food, drink, state of the mind, &c. Though set, as it were, for the defence of medicine, and for that alone, they seem compelled, by the mere force of truth, to urge that attention to other things, which, if duly regarded, would prevent in many, if not in most cases, the necessity of dosing and drugging, to the great pleasure, as well as profit, of all persons concerned.

Crusta Lactea.

Crusta Lactea, or the milky scall, as it is often called, is a disease which sometimes, though, I would fain hope, rarely, afflicts children, but which it will be of very great importance for the mother to be

able to distinguish from all those other eruptions of the head to which children are so much subject.

It usually commences on the cheek, or near the middle of the forehead, in small, whitish pustules, or blisters, surrounded by a reddish margin. These pustules gradually become yellow, and afterwards brown, and break and discharge; and the discharge is apt to continue a considerable time. In severe cases, the pustules cover the face, and, occasionally, the whole body. Two things, in reference to the disease, are remarkable, — that it never attacks the nose, and never leaves scars.

Some are opposed to doing any thing with medicine, in this complaint, on the ground that it will disappear of itself, and because, too, they suppose it will injure the child's health to dry up the sores. Others are always tampering with medicine, in crusta lactea, no less than in other diseases.

Now, it becomes us to remember that this disease is usually connected with teething, and always with derangement of the first passages. Professor Ives, of New Haven, says that it is often the result or offspring of a bad or innutritious diet. Now, it would be folly to give medicine where the cause was either teething or bad food; for, though such a course might afford immediate relief, it would weaken the bowels and the general system in the end, and, in this way, predispose to other diseases; whereas a due attention to diet, and to the state of

the gums and teeth, would accomplish the object desired as soon as it could be accomplished with safety.

Nor is it desirable to let the disease run on, without attempting to do any thing for it. Truth usually lies midway between extremes. Professor Ives says of the disease, "It is often remedied by farinaceous food and vegetable acids." Dr. Dewees (after a long and labored argument, designed to prove that the popular notion of its being unsafe to attempt to do any thing is untrue) says, "We direct the diminution of nourishment of every kind, and never permit any into which animal food enters. If the child is still at the breast, we request it to be nursed less frequently, and sometimes even confine the mother to a strictly vegetable and milk diet. If weaned, we forbid every stimulating article, and direct a reduction of its milk, confining it to thin arrowroot, with very little milk, or to rennet whey."

It is true, medicine is recommended by Dr. D., provided these common-sense measures do not succeed;* but that they are, for the most part, sufficient, we have his own testimony. "We are well acquainted," he says, "with a family of five children, who have, all in succession, had this complaint. It sometimes begins as early as the sixth

* Even Dr. D., however, like almost all who have written on the subject, cautions against every attempt to cure or dry up the eruptions *suddenly*, as of the most dangerous tendency.

month, and continues for twelve months, or even longer. We believe no attempt was made to relieve this formidable eruption in these cases."

Dr. Thomas, also, in his "Practice of Medicine," has the following remarks respecting this form of infantile eruption. "This puts on," he observes, "a very unpleasant appearance, but is, nevertheless, of an innocent nature; and it has been observed that those children who have been much loaded with it, have usually been healthy, and have cut their teeth easily."

Let me not be understood, after all, as saying, or attempting to make others say, that crusta lactea is never a dangerous complaint; or as insisting, still more erroneously, as some have done, that it is only dangerous where it is interfered with. All I wish to affirm is, that, in general, its treatment is *preventive*, and belongs to the mother; and that the cases in which medical advice becomes needful are only as exceptions to the general rule.

Sore Ears.

During the progress of teething, many children, especially those of less vigorous constitutions,* are

* Allow me to say, in this place, once for all, that the frequency, as well as the obduracy, of the diseases of infancy and child-

liable to eruptions behind their ears. These, at first, are mere pustules, which afterward become ulcerous, and sometimes have an excoriated appearance.

The same prejudice which prevails in regard to the danger of drying up crusta lactea, has a most unhappy influence with respect to the treatment of sore ears. Connected as this species of eruption is with teething, and dangerous as it is to repel or dry it up too suddenly, it is no more unsafe to cure it gradually, and in a proper manner, than it is to cure a common burn or scald. I might say even more than this, — that it is highly *desirable* to cure it; for the liquid matter which is discharged, in the case of all eruptions or sores of children, is of an acrid or poisonous nature, and tends to perpetuate the disease.

But, instead of curing sore ears, the more popular course of management by mothers — though they boast of their experience in this very thing — only increases it. What was, at first, but a trifling affair, and might have been cured (if there was no fault in the diet of the mother or child) by keeping the diseased parts clean with mild soap-suds,

hood, is almost always proportioned to vigor of constitution, either hereditary or acquired. Healthy children, if they do not wholly escape disease, suffer from it much less than others. We must not forget, however, that fatness and red cheeks are very far from being unequivocal signs of health.

and washing, occasionally, with warm milk and water, is allowed, by neglect, to become quite a troublesome sore, often highly offensive in appearance and smell, and sometimes not easy of cure; for among other evils incident to ulcerations and discharges of this kind, is their tendency to be continued by the force of habit.

"We commence the treatment of this affection," says Dr. Dewees, "by regulating the diet of the child, if this should be necessary; that is, it should be confined to milk, and farinaceous vegetables, as rice, arrowroot, and sago, either of which can be taken with milk, or with a little sugar without the milk."

The doctor, indeed, like a veteran in his profession, goes on to tell what he would do when the foregoing proves insufficient; but let it not be forgotten that, if the diet, and other physical habits of the mother and child, are what they ought to be, no further treatment will often be necessary, except what has been already mentioned — the daily use of soap and water, and warm milk and water. In short, the two main points to be secured and observed are, a proper degree of cleanliness, (external and internal,) and pure air.

It is also very properly recommended that no cap should be worn by the child, either by night or by day, but that the head should be kept properly cool; and that it should be encouraged to sleep, as much

as possible, on its back; in all which directions I most heartily concur, except the latter. The habit of lying on the back seems to me so objectionable, that I am loth to encourage it, unless the discharges are very highly acrid and offensive.

One item of advice, useful to mothers, is communicated by Professor Ives. He says that scorched linen rags, if applied to eruptions behind the ears, as soon as they appear, have a tendency to heal or dry them up, and with the most perfect safety. Of this, however, I have had no experience; but, having often witnessed their apparent efficacy when applied to galled or excoriated hands, I feel a good degree of confidence in the suggestion.

Were any thing further to be recommended to mothers, short of a resort to medical advice, it would be to use a soft poultice of bread and milk, whenever the inflammation becomes very great, or the parts very irritable. The poultice should be moderately warm, and should be changed as fast as it becomes in any degree foul.

Tinea Capitis, or Scald Head.

It is surprising, truly so, to what an extent the diseases of infancy and childhood are produced, if

not perpetuated, by neglect of cleanliness. This remark, however, is especially applicable to the complaint called *tinea capitis*.

The disease makes its appearance in the form of small watery eruptions on the head, about the roots of the hair. These tend to run into each other, and form a continuous scab all over the head, completely detaching the cuticle, and sometimes the hair itself.

Tinea capitis, once established, is exceedingly difficult of cure. On this account, the earliest attention to it is requisite; it may even require early medical advice. Much may, indeed, be done by the mother, in the first place. As soon as the complaint makes its appearance, the head should be shaved; and, as exposure of the head to the air appears greatly to aggravate the disease, it has been commonly directed to cover the whole scalp with a piece of suet-skin or a bladder. Great attention must also be had to cleanliness. All writers on the subject concur in recommending the daily use of soap-suds. "If," says Professor Ives, "the head be kept clean, and the air effectually excluded, the sores will generally heal soon, and the discharge from the eruptions will rarely become acrid." In addition to cleanliness, however, Dr. Buchan recommends a "regular, light diet."

In order to show the importance of cleanliness, and especially its superiority to medicine, I have

thought it proper to make the following extract from the writer last mentioned: —

"I some time ago saw a very striking instance of the danger of substituting drying medicines in the place of cleanliness and wholesome food, in the Foundling Hospital at Ackworth, where the children were grievously afflicted with scabbed heads, and other cutaneous disorders. Upon inquiring, it was found that very little attention was paid either to the propriety or soundness of their provisions, and that cleanliness was wholly neglected. Accordingly, it was advised that they should have more wholesome food, and be kept thoroughly clean. This advice, however, was not followed; it was too troublesome to the servants and superintendents! The business must be done by medicine; which was accordingly attempted, but proved nearly fatal to the whole house. Fevers and other internal disorders immediately appeared, and, at length, a putrid dysentery, which proved so infectious, that it carried off a great many of the children, and spread over a considerable part of the neighboring country."

One might be tempted, from a review of this statement, to raise the inquiry, whether medicine, which is given to relieve a complaint which has been induced by want of cleanliness, pure air, proper food, &c., is not peculiarly liable to do mischief; whether it does not add to the severity of

the disease, instead of mitigating it. A child, for example, is laboring under a cutaneous eruption, which, for want of daily attention to cleanliness, has become exceedingly troublesome. Now, in this case, do not all evacuants, by lowering the tone of the digestive system, tend to make the disease worse in the end, rather than to cure it?

Tongue-Tie.

Two kinds of tongue-tie appear to be recognized by the best authorities on this subject; that which is called adventitious, and that which depends on original conformation — rather malformation — of structure.

It sometimes happens that, on examining newborn children, we find attached to the frænum, or string of the tongue, an almost transparent, whitish membrane, which ties it down, as it were, or, at least, greatly limits its motion. The child cannot raise its tongue as high, or protrude it as far, as other children; and, in its attempts to draw from the breast, cannot so apply it as to form a vacuum, in consequence of which it makes a kind of clucking noise.

Those mothers who have heard of tongue-tie, and who are constitutionally solicitous about their

children, are extremely apt to imagine them to be affected in this way. As, however, it is a matter of some importance to the child, it is better to call for the best advice, when none is really needed, than to live in continual apprehension of evil. A surgical operation, should it be required, is neither difficult nor painful. When mothers come to be trained as they ought to be, they can easily perform it themselves.

The other species of tongue-tie is owing to the string of the tongue itself being too fleshy and too long; in other words, it so connects the tongue to the parts below it, that but a very small portion of it is left free. In this case, the inconveniences to the child are the same as in the former, only not so great in degree; but the course to be pursued is different. It is the more general opinion of medical men, that nothing can be done, in the latter case, to any purpose, but that we should leave all to nature; not, indeed, for fear that, if the frænum, or string, is cut, the child will "*swallow its tongue*," as some have imagined might happen, but because the operation does not appear to do much good.

Nothing has been more common, in my own practice, than for mothers to express fears that their little ones were tongue-tied; and yet I have not found, on examination, one case in a hundred where the frænum needed to be cut; nor do I believe a greater proportion than this, if, indeed, so great a

proportion, can be found *in the country*. The proportion is, of course, somewhat larger in the city; but, even here, it is not large.

Hydrocele, or Water in the Scrotum.

This disease, at first view, resembles one species of rupture, or hernia; and, though not very frequent, whenever it does appear, usually excites much apprehension. I have seen but one case of it, and that by no means a difficult one. Indeed, I doubt whether the treatment is usually as difficult as some have supposed.

Hydrocele may be distinguished from hernia, or rupture, by its equal distention, by its transparency, by not being increased by the crying of the infant, by its want of sensibility on handling it, and by its not retiring on pressure. So far as I have seen, the water is usually confined to one side of the scrotum; it may, however, be occasionally found in both. "We have several times seen the tumor," says Dr. Dewees, "as large as a small hen's egg."

It is commonly said, when this disease appears, that the child is born with it; but there are some exceptions. The case which fell under my own observation was such a one; and the mother was of a scrofulous and otherwise feeble constitution.

My own limited experience confirms the general testimony in regard to the treatment, which consists in pouring cold water from a pitcher or tea-kettle, at a considerable height, upon the diseased part, three times a day. Two quarts at once are usually recommended; but I used only one. When the complaint has been long neglected, and the child is still feeble, the treatment may require to be more thorough. A case is mentioned, by Dr. Dewees, as occurring in a child three years old, which demanded the milk and vegetable diet, and a *little* medicine.

Inflammation of the Eyes, or Ophthalmia.

Inflammation of the eyes may occur at almost any age; but some children, owing to disease, or, perhaps, to a diseased constitution, of the mother, are particularly subject to it from the fourth to the seventh day after birth. In most cases, the parental disease which excites it is leucorrhea,* a complaint in these days fearfully common. Excess of cold, and, perhaps, of heat and light, may also cause it, in some instances.

When this disease — ophthalmia, as it is called —

* Gonorrhœa, in some conditions of society, is also a more frequent cause of this disease than is to be desired.

makes its attacks thus early, it requires medical advice, and that, too, of the most skilful kind. All, therefore, I shall attempt, in giving directions to parents, is to describe the symptoms.

The eyes, in infantile ophthalmia, are first observed to be glued together, and the lids swollen, especially in the morning. This, ere long, is followed by the discharge of a purulent * matter. The eyes themselves at length become inflamed, and have a peculiarly fiery appearance. So exceedingly sensible are they to light, that they are, for the most part, kept entirely closed. After the discharge from the eyelids becomes abundant, or about the third or fourth day of the disease, the eyelids not only become glued together during the night, but they permit such an accumulation of purulent matter behind them, that it actually distends them, and seems to force them out, at times, almost even with the socket. The whole internal lining of the eye now puts on a scarlet-red appearance, indicative of a very high degree of inflammation, which may, and sometimes does, end in total blindness.

But I repeat that inflammation of the eyes may take place at almost any age. It often follows, when eruptions on the head, or behind the ears, or, indeed, discharges from any part, which have been long continued, are too suddenly dried up. Some writers have spoken of its occurrence in conse-

* *Purulent*, of the nature of pus; corrupted.

quence of too long exposure to cold air during washing, as well as of very early exposures to the influence of too strong a light, or too high a temperature.

With regard to inflammation of the eyes, induced by the latter causes, maternal treatment will be more efficacious than in the former case. At least, it is in the power of every mother to withhold the causes which produce the disease. No one is compelled to dry up eruptions prematurely, to expose the eyes to a very bright light, or to great heat, or to chill an infant too much, by protracted washings in cold water.

Indeed, when the complaint has actually arisen, a great deal may be done, short of actual medication.* Dr. Buchan says, "The diet should be spare, especially at the beginning. The patient must abstain from every thing of a heating nature. His food should consist chiefly of mild vegetables, weak broths, and gruels. His drink may be barley water, balm tea, common whey, and the like. The chamber must be darkened, or his eyes shaded by a cover, so as to exclude the light, but not to press upon the eyes. He should not look at the candle, the fire, or any luminous object; and he

* No mothe is obliged to wash her children's eyes with water impregnated with sulphuric acid or elixir vitriol. Yet I have known mothers with whom this harsh poison was a supposed specific, and was applied, without mercy, to the youngest children.

ought to avoid all smoke, as the fumes of tobacco, or any thing that may cause coughing, sneezing, or vomiting. He should be kept quiet, avoiding all violent efforts, either of body or mind, and encouraging sleep as much as possible."

There is a tenderness of the eyes which follows the small-pox or measles, and which, in fact, almost always prevails, in a greater or less degree, among those children who inherit, from their parents, a scrofulous habit, which can only be removed by time, and by invigorating the constitution. Nevertheless, even here, most of the directions of Dr. B. are in point. I do not like his weak broths and gruels so well, it is true, as more *solid* articles, equally mild in their nature.

What I should rely on, in these latter cases, more than all the rest, both locally and generally, is cold water. The plan which will be mentioned, when I come to speak of diarrhœa, scrofula, &c., as a means of hardening and invigorating the constitution, can never be too much commended; in addition to which, the eyes may be bathed in cold water several times a day. Let them not be rubbed, however. The Germans have a proverb, "Never touch your eyes, except with your elbow." This is peculiarly applicable to *tender* eyes; and the more so from the fact that people are very apt to rub them.

I have spoken of cold water; but I would avoid

pain in the application. If very cold water is disagreeable, as it often will be, let the temperature be raised a little; the colder, however, the better, provided it feels comfortable. Let the eyes, at times, be opened in the water, and held open in it from one to two seconds; or more, after a little practice.

Chafing of the Skin, &c.

Under this head, I wish to include all those excoriations which happen to children, whether at the neck, armpits, groins, or elsewhere, except excoriations behind the ears, of which I have already spoken, in a separate article.

Excoriations are most frequent and troublesome in children of a corpulent habit. First, because the folds of the skin are deeper, and therefore more apt to retain such substances, whether solid or fluid, as give rise to irritation; secondly, because the confined heat increases the evil; thirdly, because the fluids of a corpulent child are more liable to putrefaction, and, consequently, to cause heat and irritation, than the fluids of a child who is less corpulent, and, consequently, more healthy.*

There are, in nursery practice, a thousand spe-

* See the article on Obesity.

cifics for chafed or excoriated parts; among the more popular of which is mutton tallow. Now, whatever else may be used, we should avoid grease of every description. Were not children exceedingly tenacious of life, they would be more injured by such applications than they are now. They get well, however, in spite of our greasy applications, and not on account of them.

The first point to be secured is cleanliness. But, if there is irritation still, notwithstanding every reasonable effort, and if there is more or less of moisture, which always adds to the trouble, let starch or scorched flour be sprinkled on the parts. Even when they begin to be excoriated, and to discharge more or less, I know of no better applications. What is said here will, for the most part, apply to ulceration, or imperfect healing of the navel, and, in fact, to many other ulcerations.

Convulsions.

Convulsions, like acidity and flatulence, are usually symptomatic of other diseases, rather than constituting a disease by themselves. In truth, they are the occasional companion of almost every complaint to which infants are subject. Where there is any thing like irritation of the internal

organs, especially of the stomach and bowels, we should never be surprised to find convulsions.

Convulsions, — fits, as they are frequently called, in a general way, — however caused, are often sudden, and sometimes severe. On this account, mothers and nurses require a little instruction how to act before the arrival of the physician, so as to give nature the best possible opportunity of effecting the work of restoration.

One thing, if no more, may always be done. A warm bath may be prepared. There is no necessity of waiting for the arrival of a bathing-tub, as a common washing-tub, or almost any other tub, will suffice; and, for very young infants, a large pail might even answer the purpose.

The bath should be a little hotter than the blood; or, rather, it may be made about 98° at first; and a little water, of a much higher temperature, may be added (with care and caution) afterward. Sometimes there will be immediate relief, as soon as the child touches the bath.

But, as I was about to say, I would not attempt, always, to *immerse* the patient. It may be sufficient to set him in up to the hips, and have a flannel cloth thrown over his shoulders, so as to retain enough of the vapor to keep the upper limbs and the upper part of the body warm. For this purpose, a large pail may be sufficient, in the case of a small child, and will be less likely to excite his fears than a more formidable array.

This treatment has one advantage, in addition to the chance it affords of relieving the child. It furnishes employment for the friends and by-standers, and of a kind, too, that seldom does mischief. And no one knows, but he who has been the honest cause of it, (or who has, at least, stood by, as powerless as they,) the anguish which friends suffer, when a fellow-being — one, in particular, who is dear to them — is suffering, and they can do nothing which they hope will relieve him.

If the bath is not immediately efficacious, still let not the friends be discouraged. Let the sufferer be continued in the water for some time, say fifteen or twenty minutes, provided a profuse perspiration does not come on, nor any other alarming or threatening symptom.

I do not deny that the warm bath will sometimes fail. Where the cause is a mechanical obstruction, or a foreign body, organized or inorganic, it must, if possible, be dislodged by the appropriate means. But this, as I view the matter, belongs not to the maternal province.

Vomiting.

Dr. Dewees speaks of two kinds of vomiting — 1. that kind of vomiting which consists merely in

an effort of nature to throw off whatever is burdensome or offensive to the stomach; 2. that which is symptomatic, or induced by some cause foreign to the stomach itself.

Let us consider the first kind of vomiting. In this, the milk is often rejected almost as soon as it is taken, and without much effort or suffering, immediate or remote. The child seems happy, except when it is in the act of vomiting, and even grows and thrives. Nevertheless, it is desirable to prevent the evil; not by medicine, to be sure, but by other and more natural means.

It usually proceeds from one of two causes — repletion, or rude and improper handling, such as jolting and tossing, particularly soon after eating.

The first cause is to be avoided as much as possible. I know there are difficulties, and some of them are serious ones; but, if we cannot do all we desire, it is our wisdom to do, at least, all we can. One thing may be done, at any rate: the child may be taken from the breast the moment it begins to dally. Many mothers urge their children a little beyond the point to which they would naturally go, who do not think of urging them so far as to produce mischief. But let it be distinctly understood that all such urging is wrong, decidedly so; and let it be at once discontinued. Nor should the mother make it her daily practice to place her child at the

breast every time it whimpers or cries; she should wait till it is really and healthfully hungry.

There is one other error, still more glaring than those which I have mentioned. I allude to the custom of putting the child at the breast again, as soon as it has done vomiting, as if to replace what was lost. When a child is full, and more than full, and nature has rejected the overplus, it is downright tyranny to heap upon the wearied stomach the same excessive load which crippled it before.

I have known physicians who treated this subject of idiopathic vomiting too lightly, and thus, no doubt, increased or perpetuated the evil. True it is, that mothers should not be encouraged in dosing for such a complaint; for that would be a most manifest error; but it should never be said to them, as I have heard it, "O, it won't hurt the child to vomit; it will vomit itself well;" or, "You cannot hurt a child by giving it too much; for its little stomach is merely a *receiver*, which runs over when it is full."

As to vomiting from sympathy, or as symptomatic of other diseases, what is to be said of that may properly come under other heads. It is to be treated by directing attention to the cause or disease which originally produced it. I will barely premise, in this place, that overloading the stomach is always an evil, whether the vomiting is idiopathic or symptomatic; and that, if I *were* to

treat of it in this place, I should never advise an indiscriminate resort either to medicine or physicians.

Diarrhœa.

Dr. Dewees enumerates five or six species, as he calls them, of diarrhœa; viz., feculent,* bilious, mucous, chylous, lienteric, and chronic. Most or all these may be excited either by some cause which operates directly upon one portion or another of the digestive system, or by what, in the language of medical men and medical books, is called *sympathy.*

In the *feculent* diarrhœa, the stomach being weakened, in some way, and unable to digest its contents, the bowels become stimulated by the undigested food which is propelled into them, and make hasty and irregular efforts to get rid of it. It is also quite possible that the presence of bile, in too great quantity, or in an unhealthy condition, or of a disordered gastric juice, may, in some instances, produce this form of the complaint.

The *bilious* diarrhœa is a more serious affair. The discharges are not only frequent and copious, as in the feculent form, but, by means of a supera-

* *Feculent,* muddy, thick.

bundant or bad bile, they become of a bright yellow or green color. It is, in substance, the summer complaint of infancy and childhood. Cholera infantum, it is true, is very frequent among children in summer; but even this complaint often begins in a bilious diarrhœa, and only becomes cholera by neglect. Diarrhœa is also frequently combined with, or accompanied by, worms, teething, &c.

Mucous diarrhœa is somewhat different from either of the former; consisting in a frequent and superabundant discharge of that mucus which is found every where on the lining membrane of the stomach and intestines, and whose primary or natural intention is to soften and lubricate them. The discharges are frequently greenish; but not like those mentioned in the preceding paragraph. Nor are they so frequent as in bilious diarrhœa, nor so abundant as in the feculent.

When the discharges have a milky or chylous appearance, and there seems to be an absence of bile in the system, instead of a redundancy, the complaint is called *chylous* diarrhœa. This, however, is less frequent than any of the former species.

Lientery, or *lienteric* diarrhœa, is the name given to that kind of diarrhœa in which the food finds its way through the first passages scarcely changed. It sometimes follows other diseases, such as bilious or feculent diarrhœa, or dysentery; and in other instances it seems to be almost or quite

constitutional, or, in medical language, *connate*. It is a frequent attendant on scrofula, or a scrofulous constitution.

The remaining form of the disease has often been called the *weaning brash*. It derives this name from the fact of its being so often connected with the weaning of children. It appears to be less frequent in our own country than in many parts of Europe. Still it is sufficiently frequent, even among us, as well as sufficiently troublesome.

Now, I think it obvious that none of these forms of diarrhœa could exist, if the stomach and the other parts concerned in the work of digestion were not more or less debilitated in the first place. The causes, however, which tend, directly or indirectly, to induce this debility, are exceedingly numerous; and I can only take a cursory view of them.

1. Food of a bad quality. This may be the mother's milk; animal substances, especially salt animal food, (given to the child before he is old enough to receive it;) food which is too much sweetened, or which tends to run rapidly into fermentation; that which has been too long kept; and excess in quantity of that which is proper in quality.

Fruits, moreover, in the case of children who still continue to use milk in any considerable quantity, are apt to debilitate the digestive organs. Dr. Dewees objects to their use by children under two years of age; but it is difficult to present reasons

against their use at two years old, which cease to have weight as soon as they enter upon the third year. There are reasons for believing that they are difficult of digestion in children as long as milk is adapted to their use. Coming as they do in summer, when other influences (to be mentioned hereafter) are powerfully operative, my belief is, that if eaten freely, even in a perfect state, they are apt to debilitate the bowels; but when unripe, or in a state of decay, or in other respects imperfect, or eaten in excessive quantity, they are still more so. Foreign fruits are worse, if possible, in this respect, than domestic ones.

2. Drugs and medicines, such as are often given to children, especially the more active or acrid of them — emetic, tartar, opium, or laudanum, ipecacuanha, calomel, aloes, jalap, sulphate of zinc, &c. — have a debilitating effect upon the first passages,* even when given by skilful physicians; and much more so when given by quacks, or ignorant friends or relatives.

3. Violent heat, acting too long upon the surface of the body, if it does not directly weaken the first passages, does it at least indirectly. For these last are lined by a membrane continuous with the skin, and strongly sympathizing with it, called the *mucous*

* This is not to say that they are not, in some instances, to be administered, as a choice of evils. See "Health Tract, No. 1," by the author, "on Dosing and Drugging."

membrane; and when the skin is weakened by the force of long-continued or excessive heat, this membrane and the parts which it lines are apt to suffer in the same way.

4. The sudden application of cold has an effect, in very many instances, to bring on diarrhœa. For the most part, in these cases, the child may be said to take cold in the bowels — the latter having been previously debilitated by excess of heat, or some other cause. It is, however, quite possible that a sudden check of the perspiration may throw that labor upon the bowels which ought to be performed by the skin, and thus, by overtasking, fatigue and debilitate them.

5. Dampness, no less than excess of heat and cold, tends, in some way or other, to debilitate the digestive organs, and indeed the whole alimentary canal. Especially is this the case when the dampness is applied directly to the body, as in lying down on the damp ground.

6. Neglect of cleanliness imposes a heavy tax upon the bowels in the same way, or at least in a similar way. The waste matter which ought to be carried off through the skin, in the act of perspiration, is, perhaps, compelled to find its way out of the system through the mucous membrane of the bowels. Or, if this explanation of the mode in which the result is accomplished should be rejected, it would not materially affect the treatment to be hereafter described.

7. Numerous diseases weaken the digestive organs, and derange the functions of the alimentary canal; among which are scrofula, rickets, worms, teething, eruptions when repelled from the surface, &c.

8. To this numerous list of causes most authors have added a bad constitution or condition of the atmosphere, at particular seasons. In what this bad constitution of the atmosphere consists, however, no writer, so far as I am acquainted, has told us; and for a very plain reason, doubtless, — nobody knows.

Now, it happens, as we have partially seen, that some of these causes of debility of the digestive organs and alimentary canal produce one form of diarrhœa, and some another, according to the constitutional tendencies of the individual, and the nature and mode of application of the causes themselves. Much also may depend on season and climate. Causes operating in the summer, in a hot climate, for example, might induce bilious diarrhœa in one individual, in whom, under other circumstances, the tendency would be towards mucous diarrhœa or lientery.

In general, it will happen that when any of the causes which I have enumerated are in active operation to debilitate the alimentary canal or the digestive organs, the burden of the diseased action will be manifested in those parts which are weakest, or whose usual action is least perfect. Thus, if the

liver of a child is very apt to be over-active, irregular, or defective, in its action, it will be found that, whatever may be the particular causes in operation, if a diarrhœa supervenes, it will partake more or less of the bilious character. So, if there be at times a constitutional tendency to over-excitability of the mucous membrane lining the alimentary tube, and to an increased discharge of mucus, or, at other times, a deficiency of the same secretion, the form of diarrhœa — should such a disease arise — will be what Dr. Dewees has called mucous.

As a general thing, however, the following rules, with such exceptions as may appear in the preceding paragraphs, will be found to apply in the case; and, together with those paragraphs, deserve to be particularly studied by every mother.

First. Mere excess of aliment will be apt, at first, to induce feculent diarrhœa. If, however, it is not checked soon, by withholding the excess of food, it may end in almost any of the other species; but is particularly liable to assume the lienteric form.

The same is true of neglect of cleanliness; of sweet food, or, indeed, of any sort of food which runs rapidly into fermentation; and usually of bad milk — milk affected, I mean, by the debility of the mother. Feculent diarrhœa, however, if the causes above mentioned continue to operate, is liable to end in other forms of diarrhœa; as also in worms, dysentery, cholera, dropsy on the brain, &c.

Secondly. Dampness and sudden cold, where they are not preceded or accompanied by other causes, are very likely to bring on the mucous form of diarrhœa; especially in the spring, autumn, or winter. In the heat of summer, or in a very hot climate, the effect might be otherwise; and so also in the case of a bilious temperament.

Thirdly. Great or sudden heat will almost inevitably tend to produce bilious diarrhœa; and still more certainly is this the result when it is combined with teething, and certain other affections or irritations.

Fourthly. When debility of the stomach and bowels has been induced by the improper use of drugs and medicines, taken either by the mother or the child, the liver is pretty sure to be affected; and the discharges will present a green appearance. This is especially the case when anodynes are used. Acrid or harsh cathartics will, however, sometimes produce the mucous or chylous diarrhœa, rather than the bilious.

Fifthly. Fruits may produce either feculent or chylous diarrhœa; or even, in the end, a bilious state. Those which are of a bad quality are particularly apt to cause mucous and chylous diarrhœa; and when long continued, though in a very moderate degree, lientery.

The chronic diarrhœa, or weaning brash — properly so called — has its origin exclusively (so far as I know) in the cause which has given it a name.

These brief rules are given in the hope of aiding mothers in distinguishing the causes of disease, at its commencement, that they may know at once how to remove them. For what can be more obvious than that the true method of removal, especially when they are in an incipient state, is by removing the causes which operate to produce them? Of course, I leave out of view here those instances in which, though the cause is removed, the disease is kept up by the mere force of habit.

The course of maternal treatment, in all the varied forms of diarrhœa, is more than indicated by an enumeration of the causes which produce it. It may be well, however, to recapitulate.

If the disease consists of a mere looseness — in other words, in the discharge of that which, but for its thinness and great increase of quantity, would not lead us to suspect a disordered state — we shall do well to inquire, in the first place, whether the quantity of food which the child takes is not too great.

I believe this error of excess in quantity is much more frequent among us than is usually supposed, as well as a much more frequent source of disease. It is true there are difficulties to be met with, in endeavoring to correct the error; yet I do not believe they are wholly insurmountable.

The worst difficulty is with infants at the breast. Here the appetite, it has usually been held, is a safe

guide. Perhaps it is so; for I will not now dispute the position. Still, of twenty mothers, whose children were exactly alike in respect of age and every thing else — if such a thing were possible — all of whom should profess, and indeed endeavor, faithfully to make the child's appetite their guide, I should not expect to find the daily practice of any two alike.

Some would nurse a child much more frequently than others; in which case (since the very act of nursing would invite or occasion an increased secretion) its stomach would probably receive more food in the progress of the whole twenty-four hours, than if it was nursed less frequently.

Some, in haste, would hear the child cry, and, not taking time to reflect, would immediately apply it to the breast; when, perhaps, five times in ten, it was not at all hungry, but was crying for some other reason. Children have no other way of expressing their wants than by cries; they therefore not only cry when they are hungry, but also when they are too cold, too hot, too much fatigued, or when their dress or any thing else annoys them and gives them pain. If they are to be placed at the breast every time they cry, especially the more susceptible of them, the mothers of very susceptible or irritable children will be continually tied to them during their waking hours; and the children will as inevitably be fed into diarrhœa, if not into vomiting or cholera.

Others, again, will nurse on several seconds, if not

several minutes, after the child would very cheerfully discontinue, were the mother as cautious on this side of the question as she usually is over-anxious on the other; and some will not only urge them on *a little farther*, but *as far as they can.* It is even stated, on the best of authority, that there are mothers who, not satisfied at the point just mentioned, actually jolt and shake the infant, as they would a bag of grain or fruit, in order to make its stomach hold more than, in its natural condition, it possibly could.

What, then, *is* enough for the child? What is satisfying the appetite? What is taking nature for our guide? Is it to stop as soon as the child begins to nurse lazily? Is it to stop when, of its own accord, it refuses to receive more? Or is it to stop only when we cannot force more into it?

It may not be easy to answer these questions to the entire satisfaction of every individual. And yet it seems to me there is an answer to be given. My own belief is, that no child ought to nurse a moment after it begins to relax its hold, but that it should be accustomed, from the first day of its existence, to stop precisely at this point.

There will be a wide difference between nursing a child till it begins to relax its firm hold, and then admitting it to the breast no more till its stomach has had time to dispose of what was before in it, and the more common practice of letting it nurse as long

and as frequently as we can. In the one case, a child of a given age, say at nine or ten months old, may receive a quart of milk in twenty-four hours, and perhaps even retain this quantity in addition to what it rejects by vomiting; while, in the other, it will scarcely receive half this quantity, and never three fourths. Now, half a pint of milk a day, in addition to what is already enough, when administered from day to day, from week to week, and from month to month, is quite sufficient to impair the tone of a child's stomach, at such a tender age, and to lay a foundation for future disease.

There will be far less of difficulty in diminishing the quantity of a child's food, after it is weaned, than before, both because children do not then expect to be gratified every time they cry, and because their food, from its nature and the nature of the case — being more tangible, as it were — we can better determine in regard to the amount actually received. There is even one thing more which assists us — the greater ease of furnishing employment to a child of two or three years old than to one who is only a year old, or perhaps not yet six months. Very young infants incline to nurse because they have nothing else to do; but children two or three years of age can be taught to employ themselves a part of the time.*

* The reader will find this subject treated more fully in my work on the physical management of children, entitled "The Young Mother."

Where, however, the fault is in regard to quality, and not quantity, there is, with resolute people, who can keep their children under their own eyes, very little of difficulty. They have only to remove the article, whether food or drink, out of the child's sight. If they are brought to the table from day to day, and allowed to taste, or even to see, the interdicted articles, it may not be so easy to carry out our plan of restriction; or, if it were as easy, it is not as humane.

Parents who are fully convinced that a particular kind of food — say some sort of fruit — is injurious to a child, and who will yet bring him to the table where it is to be found from day to day, and tempt him not only by the sight, but by the smell of it, are surely wanting either in good sense or humanity. Such persons ought either to learn the art and practice of self-denial, or renounce their claim to the name of parent.

Drugs and medicines, where the injudicious use of these is strongly suspected, must be withheld with the utmost exactness. Every dose of elixir paregoric — and this is one of the mildest anodynes which can be given — is contributing to the disease which it has occasioned. The same, or nearly the same, may be said of all sorts of confectionary, and of every kind of sweetmeats. I would even withhold pastry, of every form, in diarrhœa.

In most instances of diarrhœa occurring while

the child is at the breast, and the mother has a sufficient supply of healthy food, Dr. Dewees recommends confinement to the breast, and to as small a quantity of milk as can be got along with. Where there is much bilious disturbance, however, it is recommended, both by him and by others, to lay aside the milk, almost entirely, and give in its place gum-arabic water, in the proportion of about three or four teaspoonfuls of the powdered gum arabic to a teacup full of water.

In reference to children of every age to whom we might be tempted to give solid food, Dr. D. endeavors to dissuade both practitioners and mothers from the use of animal food or broths. His language is, "We strictly forbid animal food or its juices under any form." This remark he repeats, or at least refers to, continually.

Dr. D.'s general directions, in regard to the treatment of diarrhœa, are so excellent, that I venture, once more, to transcribe from his work.

"If the child be at the breast, let it be confined to it, if the mother have a sufficient supply; if she have not, let it be in part supported by reduced milk and a little sugar.*

"Its drinks may be very thin — milk and water, barley, or rice water; or simply water, if it refuse

* From one third to one half water, according to the richness of the milk, is a suitable proportion; to which add sugar enough to make it taste as nearly as possible like its natural food.

those just mentioned. No solid food whatever should be given during the existence of this complaint; and every kind of liquor, whether fermented or distilled, should be peremptorily forbidden.* The child should be more warmly clad than usual, unless the weather be very warm. Its feet should be covered with socks or shoes both by day and night. If the weather be not excessively hot, but especially if it be cool, the legs must be kept enveloped in woollen stockings, and its body in flannel, provided the disease be not in its active state, and accompanied by fever and a hot skin, and these parts not cold.

"The greatest care should be taken that, through a mistaken kindness, the child do not receive articles every way injurious to its disease, such as fruits, meats, preserves, raisins, &c.; and that it be not suffered to swallow the hundred *infallible cures* promulgated by newspapers and recommended by officious and visiting gossips.

"The child should not be permitted to sit on a damp, cold place, as stone or marble steps, pavements, &c.; nor placed so as to receive a draught

* The general direction of Dr. Buchan is as follows: "The patient ought to live on light vegetable food, easy of digestion, and to drink whey, thin gruel, or barley water." Professor Ives says, "Animal food must be denied the patient; and if cow's milk be used, it must be qualified with ammonia, lime water, or some other alkali." For a more full view of this subject, the reader may consult the "Young Mother," and volumes iv., v., and vi., of the "Library of Health."

of air, — especially if its skin be predisposed to moisture."

Two things deserve notice here. First, "No solid food whatever should be given," we are told, "in this complaint." Now, if *good* bread, or plain, coarse cracker, be well masticated, I believe that, in small quantity, it is often better for children above two years of age than liquid food.

Secondly, in regard to the use of fruit. Two opposite opinions have long prevailed, in regard to the use of summer fruits. The first, and I believe the most general, belief is, that they are hurtful, — that they even invite disease. The other is, that as they come at the time when summer diseases are prevalent, and are cooling in their nature, they are intended by Divine Providence as a preventive, and in some cases a corrective, of disease.

Both these opinions have truth for their basis, and yet both embrace some error. Bad fruit invites disease; and even good fruit, if taken under improper circumstances, or at too early an age, may have an unfavorable tendency. I have already expressed a belief that milk and fruit, at the same meal, are, as a general rule, incompatible. But I have not dwelt long enough on the idea that, to the young, fruits are difficult of digestion; for to many it is a doctrine hard to be believed. How can it be possible, they say, that a thing of which children are so notori-

ously fond should be but poorly adapted to their digestive organs?

Now, the fact that children are *fond* of fruits would not of itself prove their usefulness. For they will eat "the fruit of the Jerusalem cherry, the berries of the laurel, the seed of the stramonium," and many other poisonous things, as readily as those which are not poisonous; and they will eat the unripe apple and currant as readily and eagerly as those which are ripe. Besides, it is proved beyond debate that they do not readily digest fruits, even in a perfect state, by the fact that they pass through them not only undigested, but often undissolved, as much so as corn or beans. Now, fruits cannot of course be digested, without being first dissolved, though they might be dissolved without being digested.

When, however, they can be borne, and digested with ease, they are not only harmless, but, on account of the cooling acids they contain, positively useful, as well in preventing disease, as in correcting it; so that there is a sense, as we see, in which both the opinions above named, however opposite they may appear, are true and applicable.

If it is asked how we are to know at what age the child's stomach and bowels are strong enough to endure and digest fruit, and especially to be benefited by it, my reply is, that I do not know of any rule which will enable us to determine with absolute certainty. My own opinion, however, has long been,

that until about the seventh or eighth year of age, it must be used, if used at all, with very great caution — watching its effects, and withholding it entirely whenever any evil consequences become obvious. We may know when food passes undissolved; and when it does, it should not be given, whatever may be the age or other circumstances. This is a rule which all may observe, and which is alike applicable to all.*

Another suggestion may be valuable to mothers. Diarrhœa, in any of its forms, may sometimes be continued from mere habit, long after the cause which has produced it has ceased to operate. In such a case, the course to be pursued is more difficult. Still, we should do all we can in the spirit of a suggestion in the preceding paragraphs, and persevere. A change of season may do much, especially the return of cool weather. What I should rely most on, however, would be journeying abroad, in a high, healthy country — not, indeed, in railroad cars, or in stage-coaches, nor, on the other hand, in carriages which are too easy in their motion; but in a private carriage or wagon, open to the free circulation of the air and the full influence of the sun.† Many an

* See the "Young Mother," and a tract entitled "The Right Use of Fruits."

† Exceptions there seem to be to all rules; and so there is to this. The scorching rays of a July or August sun, too long endured, might do more harm than good, and should be cautiously and sedulously avoided.

individual of robust health, whose habits are disturbed with very great difficulty, has found travelling abroad, in the way I have recommended, to induce at once a degree of costiveness. If the influence of this sort of exercise, thus conducted, has such a tendency on the strong and healthy adult, can it be powerless with respect to the infant?

It is said by some writers that it is of service to those children who are old enough to do it, to use a little self-command in restraining their evacuations. As a general rule, this may be well; and yet in a state of health there is another and an opposite rule — to obey the first promptings or indications of nature. If children can be made to restrain themselves, while the circumstances continue which seem to call for restraint, without carrying the habit into a healthy state, it can hardly fail to be useful; as useful as it is to withhold from coughing in disease, or irritation of the lungs, every time we feel an inclination. Yet it should never be forgotten that if the matter, whether liquid or solid, which causes the irritation, is retained too long, in either case, it may be productive of unhappy consequences.

Whatever may be the method of treatment of diarrhœa, — whether a change of diet alone, or a combination of that and other means, — a sudden and rapid recovery is not always to be expected or desired. In fact, it would not always be safe. As a general rule, in this complaint, — and the remark

might be extended to many others, — the slower the recovery, the better. And this consideration, if just, should make us doubtful in regard to the safety of those medicines which are so famous for the speedy cure of diarrhœa — such as Mrs. Kidder's Cordial, Warner's Elixir, &c. "Persons who have the care of children should always remember," says the author of "Advice to Young Mothers," "that there are no medicines so dangerous as those which suddenly stop a diarrhœa."

This quotation, from a writer in many respects judicious, — a grandmother, — may remind us of the danger to which mothers in general are exposed in trusting to authors which recommend the use of medicine. The very writer of whom I am speaking, — and whose work came out with the approbation of physicians, — in treating of diarrhœa, has the following remarks, which illustrate the truth of what I am saying: —

"If a diarrhœa be violent, and continue more than one day, and if it be accompanied with loss of appetite, there should be no delay in administering appropriate remedies. The least sickness of the stomach indicates the necessity of an emetic," &c.

Now, this direction to give an emetic seems to be unqualified. No matter what the cause, the treatment is the same, for aught which can be seen. An emetic must be given; and the writer goes on to direct, with a particularity and patience which are

certainly creditable, what should be the method and circumstances of its administration. A page or two farther on, however, we find her saying that, if a diarrhœa is brought on by damp, it may be cured by lying in bed, bathing the feet, and drinking warm, diluting liquors; and if by worms or bile, a purgative should be given, &c. What now becomes of the treatment by an emetic ? *

I mention this, not so much because there is an apparent contradiction in this particular instance, as to guard against trusting to medical books and loose medical prescriptions, not only in diarrhœa, but in other diseases, at least till mothers can be trained to a more perfect knowledge of the laws and relations of the human constitution.

Lastly, it should be distinctly understood that where a diarrhœa is connected with teething, or has been substituted for some other complaint, and is therefore for the time salutary, or which returns upon the patient at particular seasons, it is not to be broken up in any way, even the mildest and most natural, without much caution and discrimination; and — to repeat what has before been repeated — never too suddenly.

* Dr. Buchan says, "A diarrhœa or looseness which proceeds from violent passions or affections of the mind (and such diarrhœas there sometimes certainly are) must be treated with the greatest caution. Vomits, in this case, are highly improper."

Cholera Infantum.

Cholera Infantum, or, in plain English, the cholera of infants, is as insidious a disease at its commencement as it is dangerous when once established. It is often the sequel of other complaints, such as teething, diarrhœa, or constipation. When any one of these latter diseases has, by mismanagement, become habitual, or when, though partly removed, the causes which produced it, as improper diet, air, or clothing, are still continued, it is by no means unfrequently followed by cholera.

Of all the combinations of causes which tend to excite severe and dangerous cholera, I know of none more prolific than the following. Let a child who is constitutionally of a relaxed habit be weaned late in the spring, when about six months old, and when teething is just commencing. Let it feed fully and freely with the richest cow's milk all summer, and let the teething continue. Let the child, moreover, be much exposed, during the summer, to the great heat of the sun by day, and to the damp air or chillness of the night. Let all these things, I say, be combined, and it will be rare indeed if the subject escape cholera infantum.

In general, the stomach, in this complaint, is, from the first, more or less affected, and there is, consequently, more or less of vomiting. Such, however, is

not uniformly the case; for occasionally it comes on as a simple diarrhœa. In the more violent forms of the disease, attended, as they are, by vomiting, purging sometimes supervenes. Ordinarily, too, it is accompanied by fever, as indicated by the pulse, by the state of the brain, and by thirst. Owing to the state of the brain, the eyes have an unusual brightness, and sometimes a degree of fierceness; though at other times they are uncommonly languid, and during sleep half closed. The brain is in some few instances very much affected, even in the early stages of the disease; this, however, is by no means usual.

The thirst is, in some cases, exceedingly distressing. I have seen a child not ten months old, who never had drank a drop of water before, on being presented with a tumbler of cold water, seize it, and swallow a considerable quantity of it with almost as much readiness as an adult. Nothing, indeed, is more affecting than to witness the imploring looks of the little sufferers, and the eagerness with which they cling to the tumbler, when it is offered them.

Sometimes, indeed, our feelings are put to the trial by seeing them throw up the water as soon as it is swallowed. Indeed, this is usually the result, where the stomach is irritable, unless pains are taken to give but a very small quantity at a time. In some instances, warm water is better retained than cold;

but, as a general rule, whatever is taken should be taken cold, and in the smallest possible quantity.

The evacuations, in this disease, seldom retain any thing of the natural appearance. Sometimes they are simply liquid, with large flocculi * slightly resembling hops. Frequently, however, they are more or less green, mixed with substances of various colors, and indeed of almost every color; and sometimes apparently with some chopped vegetable.† In other instances, they abound in mucus. When the disease has made considerable progress, a peculiar odor attends the evacuations, which may remind us of water in which putrid meat or fish has been soaked; though some have compared it to bilge water. In any event, it is peculiar; and they who have once observed will not soon or easily forget it.

There is something peculiar in the whole external aspect or appearance. The child becomes very rapidly emaciated; the skin hangs in loose folds, and the flesh has also a loose, flabby feeling, the skin of the forehead appears as if bound to the bone; the eyes are deeply sunk in their sockets; "the cheeks fall in, the nose is sharp, and the lips are shrivelled."‡

It is unnecessary, however, to describe the disease

* *Flocculi,* flakes or locks.

† See Maunsell and Evanson "On Children's Diseases," p. 147.

‡ Dewees' "Diseases of Children," p. 416.

any farther; for the mother who has detected so many of these symptoms in her child as to feel sure of the approach or presence of cholera infantum, will not be willing to trust longer her own judgment in regard to its management. She will seek promptly such advice as she can confide in, and follow the directions which may be given with equal promptitude, and with faithfulness.

There is little necessity for extended remarks in regard to the treatment of this disease, even in its earliest stages. It begins so often with diarrhœa, or some other disease whose treatment has been already mentioned, that to enlarge upon it would be wholly uncalled for, and unnecessary. It is sufficient, perhaps, to say, that a cool, dry, pure air is of the highest importance to the child, whenever it can be had, or endured; that a gentle perspiration should be kept up; that the food should be as light and unirritating as possible, and that the same cautions in regard to the use of fruit which have been given elsewhere are peculiarly applicable in cholera infantum.

It may, however, be worthy of remark, that, in the course of this disease, the most singular longings sometimes arise. Even very young children desire the strongest acid or salt substances, as vinegar, salt fish, and the like. These longings may sometimes be gratified with safety, and even with apparent advantage, provided we begin with a quantity

of the object desired sufficiently small. One child, for example, whose stomach had been unable, for a long time, to retain any thing, and who seemed at death's door, requested a little cow's milk, and, upon receiving a teaspoonful at a time, every three hours, was able to retain it, and seemed to gain health and strength by it. Another individual recovered, in the use of a still smaller quantity of cider. "In general," says Professor Ives, "vegetable substances are better than animal, because, if there should be fermentation, the acetous fermentation is not so bad as the putrefactive."

A few remarks may be useful, in reference to the management of a child in whom the original disease seems to have disappeared, while yet there remain extreme emaciation and debility. Nothing, in these circumstances, is like a change of air, aided by gentle exercise, as in a chaise. Children, in the city and town, seem to be most benefited by change; but, in all, it is highly salutary. It was said by Dr. Rush, that he never lost but three patients with cholera infantum, when he could remove them from the city; and I do not believe he has at all overrated the importance of change. It is, indeed, the sovereign remedy in protracted cases, and nature's own "matchless sanative."

Worms.

THERE are more than half a dozen kinds of worms that infest the human body; but the most common are, 1. the long round worm; 2. the long tape worm; 3. the thread worm. The *long thread worm*, the *broad tape worm*, and the *fluke*, though usually mentioned by authors, are not very common.

An opinion is abroad, and is even embraced by many persons of considerable intelligence, that worms in the first passages are indispensable to health, not only in infancy and childhood, but even in adult life; and that disease of this sort consists merely in having those passages over peopled.

The contrary of all this, however, is more nearly true. It may, in fact, be doubted, whether, in a state of perfect health, it would be possible for living creatures to exist in the human stomach or bowels for a single moment. It is only when the digestive organs become, from some cause or other, debilitated, that verminous diseases prevail.

Nothing is more common than to hear people, whose children are afflicted with verminous diseases, and who are in the habit of dosing and drugging them, tell how their favorite medicines chopped the worms to pieces. Calomel, in particular, has been spoken of in this way. Now, in such cases as this, it is most likely the medicine produced an

effect upon the stomach and digestive organs, which resulted in increased action, at least for a time, and the worms were dissolved, if not even partially digested.

All food and drink, therefore, — and, indeed, all physical, moral, or mental habits, which tend to weaken the stomach and bowels, — favor the existence, development, and propagation, of worms. And, on the contrary, all food and drink, and every physical habit, which tend to give tone and strength to the same parts or organs, have a tendency to prevent their existence and increase, and, in due time, to dislodge and dispel such as are already present there. Or, in other words, as they are generated and fed by disease, so they are starved out by health.

Children, as long as they are confined, with respect to food, solely to healthy mothers, seldom, if ever, have worms; but, so soon as we begin to fill them with other things, many of which are very difficult of digestion, especially at their tender age, they begin to be liable to worms. One eminent and highly respectable physician, at a very advanced age, declared that he had never known them in children under the age of ten months.

Hence the importance of giving the young wholesome and nutritious food and appropriate drink. Crude, unripe fruits are particularly hurtful. The same is true of all kinds of oily food. It is, in fact, supposed, by many, that the rudiments of the worms

which infest the human species exist in cider, vinegar, and even water. The two former of these should never be given to children, in any circumstances whatever; and, if they are known to be inclined to worms, the water which they drink should be boiled. "The best security against these animals, as well as against disease of almost every form, is a healthy condition of the stomach and bowels, and a nutritious and invigorating diet." *

The symptoms which generally denote worms, are paleness of the countenance, particularly about the nose and mouth, bad taste in the mouth, flushing of the face, greediness, or the contrary, viz., a want of appetite, fetid breath, picking the nose, grinding the teeth, enlargement of the bowels, griping, pricking, or gnawing pains in the intestines, and slimy evacuations, sometimes tinged with blood. In the case of the long tape worm, there are also peculiar sensations, together with the prickings, in the stomach.

The presence of the thread worm, or ascarides, is attended with pricking pains at the lower extremity of the first passages, which sometimes, towards

* We are sometimes told that the "protracted use of innutritious or farinaceous diet, with little or no animal food, and an insufficiency of table salt," will produce worms. (See Maunsell and Evanson, p. 177.) Crude vegetables, either with or without salt, but especially without it, by lowering the tone of the stomach, will produce worms, no doubt; but not good bread, rice, arrow-root, sago, and the like.

evening, become very severe. I have known children scream violently, and seem even in danger of convulsions, merely from the pain. Connected with it is, at times, much itching about the seat.

I have stated, briefly, the symptoms of this disease; but it should be remembered that physicians are often unable to tell the *kind* of worms, by these symptoms; and, what is still more humiliating, they cannot always tell whether the mischief is produced by worms at all. No sensible practitioner would risk his reputation upon the event that even all the above-mentioned symptoms, combined in one person, were caused by worms; for they may all, or any of them, be produced by acrid bile in the body, and by other irritating causes.

But how, then, it may be asked, is a mother to know that her child has worms, when it is so often a matter of uncertainty with her physician? s the American mother to follow the direction of some of our foreign writers on this subject, and, upon the merest suspicion, deal out "calomel and rhubarb every other morning"? True it is, we are told that, if the bowels are too strongly affected by this treatment, the medicine may be discontinued for a short time; but how is the mother to know whether the bowels are, or are not, too strongly affected by it?

Many mothers, who have the greatest possible dread of calomel, will not hesitate to give lozenges,

and powders, and mixtures, of whose composition they are wholly and absolutely ignorant, but which often have calomel, or something equally active, for their basis. Many of these nostrums are to be given nine mornings in succession — a fact which leads one to suspect strongly that the medicine had its origin with those who believed it to be a slow poison.

Let not mothers solace themselves with the idea that, if worm lozenges really have calomel for their basis, it must be in such small quantity as to do little or no mischief; for let it be distinctly understood, and well remembered, that, as a general rule, it is the small but long-continued doses of active or poisonous medicine, and not the large or occasional ones, that produce the most permanent injury to the constitution.*

One writer says we must give injections of aloes and cream of tartar for the thread worm, or ascarides, because it "lies low in the body." Now, this will only be a temporary check to the worms; it will seldom kill them. What cannot be done by invigorating the constitution, must either be left undone, or accomplished by medicine, in the hands of skilful medical men.

* I mean that six grains of calomel, given in doses of half a grain each, every day, will produce far more constitutional mischief than when taken at a single dose; and so of six ounces of alcohol, or of a larger quantity of almost any active medicine.

Here is a field, whatever public opinion may say, which mothers cannot at present enter, either with safety to themselves or their children. I do not even like the idea of giving them sulphur "nine mornings running;" it is mere quackery. Let mothers be instructed, as they ought to be, and the case will be greatly altered.

I know many a mother, who thinks more highly than she ought to think of her superior medical skill, and who is continually boasting of her wonderful success in curing the diseases of her children, and thus saving or preventing both expense and suffering, who yet, by her tampering with medicine, is fast pulling down the very constitutions she would fain build up. Her children are troubled, either in imagination or in reality, with jaundice, and she cures them with calomel, but, in so doing, deranges, slightly, the digestive organs. These, then, are to be strengthened with bitters of some sort; but these, again, injure the tone of the stomach and alimentary canal generally, and worms follow. These last are attacked with pink-root, aloes, or calomel, any of which, though they seem to give relief again, disorder the liver, and create a demand for another dose of calomel. And thus she goes on, sowing the seeds of one disease in curing another. Yet, all the while, she supposes she is doing a great and good work, viz., curing, by her own wonderful skill, the various complaints of her children.

I wish, exceedingly, that the folly of this family dosing might be seen through by the multitudes of those who are addicted to it. In my Address to Mothers, I have ventured to doubt whether parents, in their present ignorance, ought to keep medicine in the house, or have any thing to do with it, except when ordered by a physician. There are, indeed, some enlightened families, who are almost as much afraid to keep it in their houses as they would be the contagion of the plague or the small-pox.

Hydrocephalus, or Dropsy in the Head.

This formidable disease is much more common now than it formerly was. It is also, as it always was, much more frequent in some parts of the country than in others. All children are more or less liable to its attacks, but especially those who are of a delicate constitution. Its causes are not, in every instance, well known, though it is known to be the frequent termination — very often the fatal one — of many other diseases. It is particularly apt to become the sequel of teething, and protracted bowel complaints, such as diarrhœa, dysentery, and cholera. In truth, in some seasons of the year, and at some times and places, its accession, as the sequel of chronic disease, is always to be feared, and

should be always guarded against. Especially should it be feared, where there is an unnatural irritability of the stomach.

It may be needful to describe the disease, as it usually appears; not, indeed, to set mothers at work in giving calomel every four hours, as does one of our "*mother's books*," but to enable them to distinguish the disease from other diseases, that they may the better "let it alone," when it appears, or take suitable measures for its prevention.

Hydrocephalus may be either acute or chronic. The acute hydrocephalus may, also, be of two kinds — the severe and the moderate;* though even the more moderate forms of this terrible disease are dreadful. The more severe disease is that with which children are attacked who seem, to external appearance, to be healthy, but in whom there is some cause, of long standing, or of obscure origin, which may, or may not, be traced out. The other is that which is so apt to follow other diseases, or to attack those children who are, by some means or other, already debilitated.

In the more acute or severe kind of hydrocephalus, the child is seized with severe pain in the head, which is usually referred to the forehead or temples; the head is hot, and the face red; the vessels are distended and throbbing; there are frequent flush-

* This description is principally drawn from the work of Drs. Maunsell and Evanson.

ings; the eye is unusually brilliant; light is disagreeable, and noise distressing; the child starts at the slightest touch or sound; and there is increased sensibility of the whole nervous system.

The fever sets in violently and suddenly, the intermissions being very short and irregular; the pulse is, at first, full and rapid; the breathing hurried or oppressed. Much derangement of the digestive organs is present, the bowels being obstinately costive, and the discharges very unnatural when obtained, which is, in general, very difficult to effect, even by the strongest purgatives. Their urine is usually scanty or suppressed, and may be white. The state of the stomach, in particular, is characteristic of the disease. The irritability is excessive and peculiar, vomiting being induced by any movement, especially an attempt to sit upright; while there are no corresponding symptoms of gastric derangement; for, though the appetite is gone, the thirst may not be remarkable; and the tongue is white and furred, but not red or pointed. Pain in the abdomen usually attends the complaint, and some tenderness, on pressure, over the epigastrum; but these fall far short of what accompany an abdominal inflammation.

The complaints made of the head, and the expression of the countenance, dispel all doubts as to the nature of the case. Pain in the head is loudly complained of, or the child (when unable to speak)

clasps its hands round the head, while occasionally the screams are frantic; or, alternately with these, there is a heaviness, or unwillingness to be stirred. During the periods when there is absence of the look of pain or terror that accompanies the more violent symptoms, the eye appears to be set, or vacant, with that look of dejection that belongs, so peculiarly, to cerebral disease.

This is the form of hydrocephalus which, though least frequent, runs its course most rapidly, but, at the same time, most regularly; and in it the stages of the disease are most distinctly marked. In the second stage, pain of the head is less complained of, though it is not always so; and, in every instance, there are, at least, occasional screams, or exclamations of suffering. The head droops or sinks upon the pillow, and is with difficulty raised; and the fontanelle * is often found, at this period, full or prominent. Heaviness or torpor prevails; the child lies in a comatose † state, with its eyes half closed; and a slight palsy of one of the upper eyelids often exists. The pupils are either dilated or immovable; and strabismus not unfrequently attends. The sickness of the stomach now diminishes, or it may be wholly absent; and some appetite occasionally returns; but the child emaciates remarkably;

* *Fontanelle,* the hollow, or pit, between the bones, above the top of the forehead.

† *Comatose,* resembling deep sleep.

the bowels continue obstinately costive, and there is incessant picking of the mouth and nose. The hands, which are often raised to the head, are observed to be tremulous in their movements; the child moans; and the state of debility is shown by frequent sighing. This condition, or stage, of the disease, may continue for one, or even two, weeks, unless arrested by remedial or other means; but the symptoms of the third stage at length begin to manifest themselves, and add new distress to the already terrible scene.

Convulsions may happen in this stage, in every form and degree, from the most violent general convulsion to mere spasmodic twitching of the muscles of the face, or vibratory motions of the eyeballs. There may also be an unnaturally-rigid state of the muscles; and violent spasms, or cramps, of one side may continue to recur, after the other has become paralyzed; or the child may wave one hand in the air, or toss one leg about, while the other limbs lie immovable. There is frequent grinding of the teeth, and movement of the lips and tongue. The whole appearance indicates extreme distress; the child lies moaning or raving, yet insensible; the half-uncovered eyeball shows the white part of the eye, suffused more or less with tears, the pupil dilated, and the cornea dim, and coated with a sort of film. The skin is, in some parts, covered with a profuse perspiration, while in other parts it is dry, or

burning hot. The pulse becomes exceedingly rapid, more so than in almost any other disease; but this apparent effort at reaction soon gives way; the pulse grows gradually weaker; the breathing becomes unequal, and the coma more profound. The child lies in a state of utter prostration, — the abdomen being drawn in, and the limbs relaxed, — and dies in a state of collapse, frequently preceded by a violent convulsion. The duration of this third or final stage is exceedingly variable, sometimes lasting only a few hours, at others a week or two, or even more.

The more common * form of acute hydrocephalus is much less strongly marked, but needs, for this very reason, a particular description. Great lassitude, languor, and irritability, are its first symptoms. The child is very restless, dislikes light and noise, is much averse to exertion, totters in its walk, or drags one limb after it, and is soon fatigued in an attempt to sit up for any length of time, which it is unable to do. There is heat of the head, and pain; the pain being occasionally complained of in the eyes, or back of the neck, and alternating with pains in the limbs or abdomen. There is some

* Some may wonder why I have been at the pains to present, from the best authors, the whole of this terrible series of symptoms, since they are but rarely witnessed. It is because they *are* witnessed, and it is highly desirable that mothers should know something about them when they actually appear.

fever; the conjunctiva of the eye is injected, or the pupil contracted. There is grinding of the teeth during sleep, and starting, or screaming, on being awakened; but the intellect seems to be little disturbed; for the child, though unwilling to be spoken to, replies correctly to questions asked. A sudden stammering or faltering in the use of a particular word, is always to be looked on as a serious symptom. The peculiar irritability of stomach, before noticed, is present; and the somnolency, deep sighing, and peevish, shrill scream, so characteristic of hydrocephalus, complete the picture. The disease passes through its several stages as before described, but not always in a marked manner. In one particular, at least, is this true; the pulse may be invariably fast in the latter case, whereas it is exceedingly variable in the former.

It may be needless to add that, where the whole train of the foregoing symptoms comes on, in either form, neither maternal nor medical skill will be likely to avail much; for death will be the usual result. Still, something may be done, if the disease can be distinguished soon enough.

Let it not be understood that any one of the symptoms which has been mentioned — not even the glassy appearance of the eyes, or the squinting — is, of itself, a certain sign of hydrocephalus. We have seen that the eyes sometimes assume a peculiarly bright, glistening, and even glassy, ap-

pearance, in several other diseases; and as for squinting, it may be the result of mere weakness, or an inability to use the eyes, or, what is more common, of some careless habit of the mother or nurse. The cradle, for example, is sometimes placed in an oblique position with respect to a bright object which the child inclines to look at; and this position may be continued for a long time.

Nor is it to be understood that nothing can be done in the way of preventing hydrocephalus, till the disease is so far advanced as to defy the combined efforts of kindness and skill. There are — I repeat it — many symptoms of the disease which appear so early that they may be discovered, and the child, perhaps, saved.

Headache, for example, in infancy and childhood, if it should frequently recur, and with violence, should always be suspected, and the progress of things carefully watched. Especially should watchfulness be exercised, when it is known that there is a scrofulous tendency in the child's constitution; for, wherever we find a scrofulous taint, we find, also, a tendency, more or less strong, to hydrocephalus. Indeed, we might almost say the same of rickets, and many more diseases, which are the result of debility in the child, or in those from whom he derives his existence.

Of the means of preventing scrofula, rickets, &c., or, in other words, of giving tone and strength

to the first passages, and, indeed, to the whole system, I shall treat more fully in their proper place. Headache, in truth, is usually symptomatic of a disordered state of the stomach; so that, whatever improves the condition of the latter, will be likely, in nine cases in ten, to relieve the former.

I must say something, under this general head, of *chronic* hydrocephalus, which sometimes, also, occurs.

In this form of the disease, the head gradually enlarges in size, and the headache, fever, and other symptoms which belonged to the more active stage, subside; or, as more generally happens, the disease arises insensibly, without any antecedent acute stage. The head sometimes attains to an immense magnitude, the sutures being separated, the fontanelles transparent and full, with a distinct fluctuation, perceptible on pressure, while the face retains its natural size, and gives to the physiognomy a very peculiar expression. In a few instances, instead of general enlargement of the head, a fluctuating tumor may be felt near the occiput.* This is surrounded by the investments of the brain, so that, upon pressure, the fluid compresses the cerebral substance, and thus gives rise to coma, or convulsions. The senses become blunted, and the intellectual powers impaired, or altogether sup-

* *Occiput*, the hind head, or hind part of the head.

pressed, as the disease advances. Muscular power is much enfeebled, so that the patient is unable, or unwilling, to move about; and the enormously-distended head can no longer be supported, but droops upon the shoulder or the chest. This gradual diminution in the sensitive and locomotive powers, while the head increases in size, marks the progress of chronic hydrocephalus in the child, after it has passed the first year of its age.

But, with this form of the disease, as with the others, neither the mother nor the physician can do much, except to invigorate the system. This is always safe; here it is indispensable, and affords the only hope of prolonged life, or even of temporary safety.

Mumps.

The name usually given to this disease, in books, is cynanche parotidæ. It consists, essentially, in an inflammation of the parotid glands.* It sometimes attacks one side, only, of the face; at others, both. In the latter case, the two sides are not often attacked simultaneously, but more often in succession.

In general, the mumps is a very trifling disease It begins with a sensation of stiffness and soreness

* The parotid glands are the largest of the set of glands usually known by the name of the salivary glands.

about the angle of the lower jaw, followed by swelling, which increases for about four or five days, after which it gradually subsides. When the glands on each side are obliged to go through the process of inflammation, one after the other, the disease is, of course, more protracted and painful.

This is one of those diseases which do not recur the second time. I know it is frequently said that, where the glands of only one side are swelled, the disease may appear the second time; but I believe it is not so. In any event, I have never seen any thing of the kind.

It has been observed that the mumps is a trifling disease. It becomes dangerous, however, when, during its progress, a check is suddenly given to the perspiration.

Such suppressions of the perspiration are apt, in the first place, to cause what is called a metastasis,* or translation of the disease, to the testes of males, and to the breasts of females. This metastasis, however, is much more common in adult life than in infancy, or even in childhood.

In the second place, a suppression of the perspiration is sometimes followed by convulsions. I remember a fine, healthy little boy, about two years of age, who, when first taken with the disease, was allowed to go with his feet wet for hours together. I saw him pacing the common, one April morning,

* *Metastasis*, a change or transfer to another part.

with his feet and clothes, nearly to his knees, as wet as they could possibly be; and the very next day I saw him writhing and expiring in convulsions. His parents and friends did not, at first, know, it is true, that the mumps were coming on; but this did not wholly exculpate them from blame; for they did not take as good care of him as they ought to have done, at such a season, even if nothing at all had ailed him.

Thus far, I have spoken of the disease in its most regular forms, and with the more usual translations. There are, however, at times, considerable deviations from what has been mentioned. There is, occasionally, considerable fever, which, though usually of the inflammatory kind, has been known to assume a typhoid form, and become exceedingly troublesome.

In the summer of 1828, this disease prevailed in one or two places in the interior of New England, attended with fever of a mild, typhoid description. The swelling was not translated at all; for it attacked, simultaneously, all those parts of the system which it is wont to attack in the worst instances of metastasis. At first, I was disposed to use medicine in moderation, such as gentle cathartics, blisters, and fomentations. One aged woman, however, who was famous for dosing and drugging, and whose influence, in a few families, was considerable, was for *stimulating*. The result proved that neither of

us was correct in our practice, but that the let-alone practice was the most successful. In some cases, there was so much irritation of the stomach that the patient could not be raised up in bed without vomiting. Yet, even here, the less of interference, the better, most evidently.

Professor Ives, in his lectures on the diseases of children, is accustomed to say that the students of Yale College were afflicted in a similar way in the winter of 1808–9; in which case, as in the foregoing, little use was made of medicine.

Occasionally, too, the parotid gland, the original seat of the disease, is so enlarged and inflamed, that the jaws cannot be moved without excessive suffering; and there is severe pain extending to the ear; and, in a few instances, a degree of delirium has been known to come on.

In general — that is to say, in at least four fifths of the cases which occur — nothing is necessary but a mild diet, the avoidance of cold, and a little patience. I do not believe in the necessity of medicine, even of the simplest kind; nor in the necessity, very often, of calling a physician.

Some parents are so much afraid of the disease, that they will suffer great inconvenience themselves, and expose their children to still more of future suffering, rather than allow very young infants to contract it. There is certainly some choice to be exercised about the season. I should greatly prefer

the summer to the winter. But between May and November I would never subject a child to any considerable present or future evil by avoiding the mumps. Indeed, as a general rule, the earlier the disease is encountered, the better.

Quinsy.

Quinsy, or cynanche tonsillaris, is essentially an inflammation of the tonsils. The tonsils are small glands lying at the side of the throat, near the root of the tongue, which, when inflamed and reddened, can be easily seen. They are not unfrequently denominated the *almonds* of the ear or throat, from a supposed resemblance to the almond.

Quinsy is in some respects as unlike mumps as can possibly be. The latter makes its attack but once, while the former may attack the same individual to the thousandth time. It is, in fact, commonly said that the oftener a person has it, the more liable he is to its return. In other words, it is one of those diseases, the tendency to which seems to be kept up by habit.

It is brought on, almost exclusively, by exposure to cold. There must, however, be a predisposition, in this particular part of the system, to be affected, and to be affected in this particular manner. For

it is not exposure of the neck alone, which produces the disease, but exposure of the surface generally, as in keeping on wet clothes. The question, then, might be raised, why the throat should be affected rather than the nasal membranes, or the lungs, or the bowels; and could be much more easily raised than answered.

In the first place, singing or speaking loud or long, or whatever strains the throat, may induce the disease. Secondly, it may be caused by omitting the cravat or stock, which is usually worn. Thirdly, by exposing the throat in a peculiar manner, or sitting at a cool window, or by travelling against a cold wind, while the rest of the system is in a comfortable state of warmth. Fourthly, by drinking cold drink when the body is warm. Fifthly, by sitting with wet or cold feet. Sixthly, by remaining too long in a moist or damp place, or sleeping in a damp bed. Seventhly, by occupying rooms newly plastered or whitewashed. Eighthly, by irritating or improper food. Ninthly, it may be excited by the temporary stoppage or check of any customary evacuation.

In fact, with those who have become habituated to this disease, the slightest causes appear sufficient to bring it on. Perhaps no one thing oftener excites it, than going abroad into the cold or damp night air late in the evening, when we have been sitting for some time and conversing in too warm a room, and per-

haps, in addition, drinking hot or warm drinks. Or, if we have been exercising freely, as in dancing, the result is about the same as if we have been sitting.

It is highly desirable to break up the growing habit, in young people, of being attacked by this troublesome disease. With this view, great pains should be taken, 1. to strengthen the general system; 2. not to weaken the throat; 3. to avoid the causes which predispose to or excite the disease.

The rules for invigorating the system, generally, are the same, of course, which have been pointed out or suggested elsewhere. Air, temperature, exercise, food, drink, clothing, sleep, and cleanliness, must all receive due attention, as also the state of the mind and the affections. One thing, however, might be added, in connection with the subject of cleanliness — I mean cold bathing.

I would not, it is true, that mothers should dip their babes into cold water as soon as they are born, to prevent their having the quinsy. Nor should the practice of cold bathing be commenced when the infant or child is already suffering from the disease. But, if properly begun, according to the rules laid down in Dr. Coffin's "Essay on Cold and Warm Bathing," or in my own little tract, entitled "Thoughts on Cold Bathing," the consequences cannot fail of being highly salutary.

Local bathing with cold water, or even, as some recommend, with equal parts of cold vinegar and

water, (washing off the vinegar again with water,) if begun with caution, cannot fail of having a good effect. It should be done in the morning, and done very quickly; and the application should only be made to the neck and breast.

But when the throat is already actually inflamed, we should not only avoid the application of cold water, but of cold in all its forms, especially when combined with dampness. Indeed, it will be advisable, for a short time, to wrap up the neck in flannel; though, when the latter has been long worn, it should not be too suddenly removed. In many parts of this country, it is customary to wear a stocking (taken immediately from the foot) around the neck, all night; but here, too, caution is necessary the next day.

Great quiet of body and mind should be maintained. Speaking and singing, with all the other exciting causes which have been enumerated, should, as much as possible, be avoided. It is desirable, whether sleeping or waking, to keep up, throughout the whole extent of the surface of the body, a gentle perspiration.

The food should be mild, and in small quantity. A little plain bread, with gruel, is best. For drink, I would use water, and occasionally mild vegetable acids. Gargling the throat with vegetable acids, as a mixture of vinegar and water, or lemon juice and water, is useful; or with the juice of the berry of

the common sumach, or of the currant.* Currant jelly is a very fashionable article of food in this disease; but it should be used very moderately.

Bathing the feet and legs in warm water, on going to bed, either every night or every other night, is also one of the best things that can be done, and greatly hastens the day of cure.

Dr. Buchan observes that, "if people were careful to keep warm, — to wrap up their throats with flannel, — to bathe their feet and legs in warm water, — and to use a spare diet, with diluting liquors, at the beginning of this disease, it would seldom proceed to a great height, or be attended with any danger;" and I have no doubt of his correctness.

Even after the disease is partially formed, it is thought by many that the application of alum is sufficient to prevent its running its usual course. One of the most eminent medical men in this country, or indeed in any country, is himself subject to frequent attacks of quinsy, which he almost always succeeds in breaking up — or, as he says, "nipping in the bud" — at the very commencement. He uses the precaution to carry a lump of alum in

* Dr. Dewees objects to gargles after the disease is fairly established; and so do I. What I aim at, here, is such a course of treatment, very early, as may prevent the full and complete establishment of the disease. There is room enough beyond this — at least it is so too often — for more active medicines than gargles.

his pocket, and, when he perceives his throat getting sore, dissolves some of it in his mouth.

Chicken-Pox.

This is so mild a disease that not a few writers on the complaints of children do not mention it. Dr. Dewees says nothing about it in his writings; neither does Professor Ives in his lectures. Dr. Buchan, who is apt to speak where there is the least necessity, is wholly silent. Dr. Cullen, one of the "fathers of medicine," just mentions it, but passes it over without saying one word about the treatment; merely observing, "It is hardly ever attended with any danger." Indeed, it would be difficult to find, in any sensible medical work, the least directions to use medicine for it. Dr. Eberle, after observing that it "very seldom requires any medicinal applications," just adds, "Gentle aperients,* and a mild antiphlogistic † regimen, is commonly all that is necessary." Dr. Maunsell says, "Keep the child in bed two or three days, and prohibit animal food or heating drinks. Towards the close, a mild laxative may be given." As to the laxative, or aperient,

* *Aperient,* opening to the bowels.

† *Antiphlogistic,* mild; bland; cooling.

I do not believe in its necessity, unless there is costiveness.

And yet, after all this testimony against the necessity of medication in this complaint, we find in one popular work, designed for mothers, the following unqualified directions: —

"Treatment. On the first attack, let the child take one teaspoonful of ipecacuanha wine every half hour till it excites sickness. The bowels are then to be evacuated by the following medicine: —

"Powder. Senna, jalap, scammony, of each in powder, two grains. Let them be well mixed together with twelve grains of sugar. This may be repeated in any stage of the disorder, in case of costiveness.

"As a cooling medicine, the following powder may be given: — Nitre, five grains; antimonial powder, one grain; sugar, half a teaspoonful. To be taken every three hours, according to the degree of fever."

It seems to me wholly unnecessary to state further facts, with a view to show the danger of our relying on medical prescriptions in books, in the treatment of disease; and the far greater safety of trusting to physicians in every thing which is beyond our own knowledge.

Kine-Pox.

THERE is still a difference of opinion, in the community, in regard to the extent of the security which vaccination affords against a still more terrible malady. In truth, there are some among us, even now, who doubt the utility of vaccinating at all. Among the few intelligent persons of this description was the late eccentric William Cobbett. In his "Advice to Young Men," he inveighed against vaccination with much more of assurance and vehemence than good sense or modesty.

But we have skeptics on this subject on this side of the Atlantic. I have met with many, in the course of two or three years, who utterly reject the idea of vaccination; insisting that the remedy, all things considered, is as bad as the disease.

Now, it seems to me too late in the day for men or women of good sense, in either hemisphere, to become the advocates of so strange and ill-grounded an opinion. For, if there be a fact in the world well established, it is that kine-pox, as a general rule, (with as few exceptions as to most general rules,) is a preventive of small-pox; and as to the comparative safety, will any person in his sober senses entertain, for a moment, an honest doubt?

As an example of the efficacy of vaccination, the small-pox, during the last century, destroyed from

12,000 to 15,000 persons in Sweden yearly. Since vaccination was enforced there by law, viz., about the year 1801, the deaths a year from small-pox have not exceeded 50. In Prussia, during the last fifty years, the deaths from small-pox have fallen from 83 in every 1,000 births to 9.

In view of these and other facts, it appears to me we ought to be established in the belief that vaccination is a duty; one which should not be deferred; and that the earlier it is attended to, the better.

Let it be done, moreover, as it ought to be done — by a physician who is skilled in the nature and treatment of the disease. All medical men profess to be thus skilled; but all are not so, most certainly. I know of more than one medical man, whom I would no more trust in the selection and insertion of the virus, than the veriest ignoramus in the land. He *might*, indeed, be the instrument of doing the work well, and so might the ignorant person; but, in either case, it would be by accident.

The vaccine matter is, or should be, inserted just under the cuticle. If done properly, and with the best of matter, the following, according to Dr. Eberle, will be the course of the disease: —

"Towards the close of the second day after the insertion of the virus, a small point of inflammation may usually be seen, where the puncture was made. On the third day, this point is more distinct; on the fourth, it generally assumes the character of a small

pimple, encircled by a very faint and narrow inflamed basis or areola. This pimple now gradually enlarges, and, on the fifth day, begins to assume a perfectly regular and circumscribed form, with a flattened surface, and a small depression at the centre, somewhat darker than the rest of its surface — an appearance which it preserves throughout its whole subsequent course.

"About this period, also, the vaccine pock changes from the pimple to a vesicle, containing a limpid fluid. From the fifth to the ninth day, the pock continues to enlarge in its circumference, but not perceptibly in elevation, so that its flattened appearance becomes more and more conspicuous. About the ninth day, the pustule is at its full state of maturity; and it is at this period that the constitutional symptoms (if any occur) begin to show themselves. In some instances, the glands of the axilla* become painful and swelled, and a state of general languor and drowsiness, with slight creeping chills and alternating flushes of heat, occur. Frequently, however, no constitutional symptoms whatever supervene.

"About the eighth day, the slight circle of inflammation which surrounded the pustule, in its early period, begins to increase, until, by the tenth or eleventh day, it forms a broad and beautiful areola round the pock. By the eleventh day, the centre

* *Axilla*, the armpit, or the hollow below the shoulder.

of the pustule, which is slightly depressed, begins to assume a darker appearance; and this darkness gradually extends towards the circumference, so that, by the fourteenth day, the surface of the pustule is converted into a brown scab. This scab becomes darker and darker, until it acquires a deep mahogany appearance. In a few days more, the scab begins to separate at the circumference — still, however, retaining its attachment at the centre — and eventually falls off, generally between the third and fourth week from the time of vaccination, leaving a slight depression in the skin. The areola is usually most perfect about the seventh day after the commencement of the pustule, or on the eleventh day after the vaccination, and is attended with some degree of tumefaction and hardness."

Among the objections which have of late been urged against vaccination is the following — that we are liable, in taking vaccine matter from the arm of one person, and placing it in the arm of another, to transfer the diseases of the individual from whose arm we take the matter. Syphilis, that terrible scourge, it is affirmed, may be thus transferred or translated to the most unoffending and healthful of our race.*

* Dr. Eberle testifies that he has several times known alarming cutaneous diseases brought on in this way, especially in persons of a scrofulous habit; and he cautions us, with great earnestness, to be careful in the selection of the vaccine matter.

Such a transfer, however, may be prevented by selecting a wise, worthy, and experienced physician for our purpose. Such a physician will never take matter from the arm of a syphilitic patient.

"It is a curious and interesting fact," says the same excellent writer from whom I have just quoted, "that the vaccine disease occasionally counteracts or removes other affections of a chronic character, particularly chronic cutaneous diseases. In the report of the central vaccine committee of France for 1818–19, it is stated that thirteen medical men have seen examples of vaccination proving the means of curing other eruptions, more especially the *crusta lactea;* and fully authenticated instances are recorded of the removal of scrofulous swellings, ophthalmia, and whooping cough, by vaccination. Of the power of the vaccine disease to moderate and abridge the course of whooping cough, I have myself witnessed several examples."

Medical treatment, in kine-pox, is hardly ever needed. It would, in fact, do more of harm than of good. If there is much fever, or tendency to fever, the food should be reduced as to quantity; and, whether there is a feverish state or not, it should be mild and unirritating.

Of late, on account of the rising belief that the susceptibility of the system to the action of the small-pox virus is renewed after the lapse of a few years, at least in some persons, it has become common

to vaccinate the second time; and I like the plan. I like, moreover, to have it done immediately; that is, within a very few weeks. Some prefer having it done about five or six days after the first operation. If the first vaccination was a sufficient protection, "a vesicle will rise," says Eberle, "at the point of the second vaccination, but it will differ in its progress from the first, by being surrounded with a complete areola as early as the second or third day of its appearance, so that the areola and the first and second vesicles commence nearly at the same time, and progress together, side by side, as it were." In general, a distinct, circular, radiated, punctulated, and not very large cicatrix, may be regarded as a pretty certain indication that the vaccine affection was perfect. When, on the other hand, the scar is large, and bears the marks of having been formed by high local inflammation, and wants the distinctive characters just mentioned, there is much reason to apprehend that the system has not been effectually secured against variolous disease.

The more I examine this subject, and the more I observe the progress of disease in the world around me, the more am I assured of the importance of vaccination, even though it were always necessary, as I believe it to be, to revaccinate. For though even this may not always secure us against the smallpox entirely, yet the number of instances in which it affords the most complete security is beyond all

comparison greater than the number of those where it fails. Besides, where it does not entirely subdue the susceptibility to small-pox, it lessens it to such a degree as to render the latter very mild and simple, hardly requiring any attention or medicine.

Small-Pox.

If the views which have been advanced in the preceding article are correct, it will be seen that, as a general rule, the small-pox may be prevented; and that the trouble it costs to vaccinate and revaccinate, is very trifling in comparison with the evils to which we are exposed by omitting it. It will also be seen that if, in spite of the pains we have taken, the small-pox should actually be contracted, it will usually be, at worst, a slight disease.

Now, then, I maintain that parents have it in their power, with as much certainty as attaches to almost any thing else below the sun, to secure their children from the worst evils of one of the most deadly scourges which ever afflicted our race. And does not this — to repeat what I have already said elsewhere — involve obligation?

But granting that, after all, small-pox is contracted — what is the mother to do? Is she to trust the disease to nature, or call a physician?

In the present state of maternal ignorance of this subject, I should certainly recommend the latter. Nevertheless, for the benefit of those who are willing to trust the case to their own knowledge and care, and to nature, the following thoughts are subjoined.

Avoid close, unventilated rooms, and too much bed-clothing. In no disease is pure, cool air more salutary than in small-pox. If a child, in the worst of the fever which attends the disease, wishes to go to the window, or into the open air, he should be indulged in it. Of course I do not mean to encourage abuses, such as sitting long by a window, in a *current* of cold air, especially when the room is very hot, or sitting on the ground.

Great pains should be taken to keep the room — which it is desirable to have *large*, if it *can* be — well aired, by night and by day. The bed-clothes should be as light as possible, provided the patient is not chilly, and should be often changed. The clothes worn about the body by day should be wholly changed at night for a well-aired night-dress. The sleep should be as quiet and undisturbed as possible.

The drink should be water — neither too cold nor much heated, — rice water, toast water, sugar and water, &c. Lemonade and tamarind water are also useful when there is much heat or thirst; or, indeed, almost any drink whatever, which is gently

acid. No fermented or alcoholic drinks should be allowed; nor any tea, coffee, or chocolate. I have spoken as if the water should not be too cold; but when, in the fever, cold water is particularly desired, and proves agreeable, it can never be pernicious, if taken in very small draughts.

The food should be as mild and unstimulating as the drink. Bread, rice, boiled wheat, rye, or barley, plain Indian pudding, &c., are the best. No animal food should be given — not the least — nor any animal broths. Even milk, in the height of the fever, is unsafe. Butter and cheese, and oily substances, and above all the rest, salt substances, should be avoided. No condiments or seasonings should be used with food, except, perhaps, a little sugar or molasses.

This disease was first described minutely by Rhazes, an Arabian physician, who was born in the year 852; and it is singular to observe that his plan of treatment, though made out nearly a thousand years ago, accords, in a degree, with the most approved plan of our own day. "The diet," he says, must consist of "yellow lentils and tarts of unripe fruits," and their drink "should be water cooled with snow, or clear, cold spring water; with which also their chamber may be sprinkled." They must frequently eat "acid pomegranates, and the inspissated juices of acid and astringent fruits." The patient must "go into cold water, and swim in it,

about noon. He must abstain from wine and meats made by a mixture of flesh, onions, oil, butter, and cheese;" as well as from "mutton, beef, shell fish, and high-seasoned things, and hot seeds; but if his temperament be hot and dry, and apt to be inflamed, he must eat cooling and moist garden herbs, purslain, mallows, beets, gourds, cucumbers, sorrel, and small pumpkins. All acid things are proper to cool the blood and check the ebullition," especially the sour, bitter water "which swims upon buttermilk exposed to the sun." *

The practice of Sydenham, who flourished nearly 200 years ago, and which is essentially the practice at the present time, is as follows: — "As soon," says he, "as the signs of small-pox show themselves, I keep the sick from the open air, and forbid them the use of wine and flesh, and allow them small beer, gently warmed with a toast, for their ordinary drink; and now and then I allow them to drink as much of it as they will. I order them, for their victuals, oatmeal and barley broth, and roasted apples, and other things which are neither hot nor cold, nor too hard of digestion. I forthwith prohibit a hotter regimen, and the use of all manner of cordial medicines; for I have more than once observed, in young people of a sanguine complexion, that a hot

* It may be thought that I ought, here, to describe, in a separate article, the varioloid; but it is so much like the small-pox in its mild forms, that its treatment cannot be essentially different.

regimen and cordials, given to force out the small-pox before their due time, have so little promoted their coming out, that, on the contrary, they have given a check to it."

The indulgence in small beer is only necessary to those who have been accustomed to wine and flesh, or a full and stimulating regimen. Indeed, to the water-drinker who should be seized with the small-pox, or to the young child, it would be dangerous, if not fatal.

Measles.

Measles, in its first stages, resembles a severe influenza, and afterwards scarlet fever. There are no other diseases, with which we should be likely to confound it, except, perhaps, the French measles, a singular affection, which is sometimes, though rarely, seen among us, but which is usually so trifling an affair as to require no medicine.*

When the measles prevails in the neighborhood, and the symptoms which usually attend a severe

* Aside from its mildness, this singular affection almost exactly resembles the true measles, except in the two following particulars:—First, the redness which attends it is without the appearance of catarrh. Secondly, it affords no protection against the true measles.

catarrh or influenza begin to make their appearance in your family, such as hoarseness, drowsiness, languor, pain in the limbs, head, chest, or back, slight cough, difficulty of breathing, the eyes slightly inflamed, with an abundant discharge from the eyes and nostrils, and a frequent sneezing, the measles may, at least, be suspected.

This disease is more or less severe, according to the season in which it appears, and other circumstances. It is even, at times, dangerous and fatal. When not dangerous, it often leaves very troublesome affections or consequences behind it. Among these are weakness of the eyes, diarrhœa, dropsy, and consumption. The diarrhœa which follows measles is, occasionally, very obstinate, and the weakness of the eyes still more so. I have seen the latter almost ruined for life by it; and, in very many cases, they do not recover their strength in ten, fifteen, or twenty years, until, as we sometimes say, we outgrow it.

The object of the remarks which follow is to prevent these and other distressing consequences, rather than to describe a disease which every body knows, when fully established; or, above all, to give particular directions in regard to its treatment.

There is a very general impression abroad, that the eruptions, or red spots, which are usually supposed to be the distinguishing characteristics of this disease, ought to appear immediately, and that the

sooner they appear, the safer and the better for the patient. In this belief, as soon as measles are strongly suspected, the child is put at once to bed, covered with a large amount of clothing, surrounded with heated bricks, or bottles of hot water, and plied powerfully with various sorts of herb teas, and sometimes with drinks still more stimulating. Among the latter, especially in those families which have not adopted the temperance principles, milk punch holds a conspicuous place, and so do tamarind punch, currant punch, and even hot rum toddy. The sour punch is less hurtful than the rest, but is not necessary; and as for the toddy, it is rank poison. And yet you might almost as well attempt to convince some people that the sun stands still all day, while the earth turns round, as that spirituous mixtures, or, at least, milk punch, is not adapted to "bring out the measles."

Now, when the danger of this error, and the possibility of doing something to prevent it, are duly considered, I cannot help hoping that suggestions like these, notwithstanding the multitude of medical works already written for popular use, may be found not merely useful, but necessary; and may, among other things, contribute to prevent a most murderous domestic practice.

The stimulating treatment of which I have spoken, — external and internal, — always adds to the fever which exists, and, instead of bringing out

the eruption more speedily, retards it. Many individuals are, in this way, made feeble for life, and not a few are, at once, totally destroyed. My own eyes and lungs were near being ruined in this way, at the age of about fourteen; and it may, therefore, be readily supposed that, on this subject at least, I feel a deep interest.

The truth is, that measles is an inflammatory complaint; and the treatment should be mild, and gently cooling, rather than stimulating or heating. The most experienced physicians, in the more common forms of the disease, find no medical treatment necessary, except, perhaps, in one case in a hundred, a little bleeding; though, if the disease becomes at all severe, I would certainly call a physician. His advice, in regard to the best method of getting well, would be serviceable, if medicine were out of the question. For there are wrong ways of recovering from any disease, — especially, and above all the rest, the measles, — as well as right ones; and it is of very great consequence to an individual, with nearly the whole of life before him, that his recovery from sickness should be such as will secure to him the greatest amount of future health and happiness. But I have spoken of this before.

Although the early stage of measles requires cooling treatment, yet actual chilliness, external or internal, is still more hurtful than intense heat. The temperature of the sick chamber should be

about 60° or 65°; and the clothing should be just sufficient to render the patient comfortable. Our own sensations will not fully determine the point for him; he must be permitted and required to judge, in part, for himself.

A moderate degree of abstinence, throughout the disease, but especially at first, is always indicated. There may be cases where the patient, in recovering, needs stimulating food and drink; but they must be extraordinary cases. In general, an individual, in recovering from measles, should be confined to a milk or vegetable diet, and, if the air is damp, cold, or changeable, should wear flannel next to the skin.

When a cough, and other symptoms of consumption, remain after the measles, says Dr. Buchan, the patient ought to use ass's milk, and, if in a large town, remove to a free air, and ride daily on horseback. He must keep close, he then adds, to a diet consisting of milk and vegetables; and, if these means do not succeed, he must remove to a warm climate.

Here, too, even Dr. Maunsell allows Sydenham to be the highest and best authority. This eminent British writer of two centuries ago, in speaking of his treatment of the children of the countess of Salisbury, says as follows: —

"I ordered them to keep their beds two or three days before the eruption, that the blood, according to its own genius, might cast out, through the pores, the particles that were easily separated, which oc-

casioned the disease; but I did not permit that they should have any more clothes on, or fire, than they used to have when they were well. I forbade the eating of flesh, and allowed them oatmeal and barley broths, and now and then a roasted apple, and, for their drink, small beer, and milk boiled with three parts of water." For the rest of the treatment, he only prescribed something to "loosen the cough," when very severe, or to open the "bowels" gently, when "confined." He even says, so far as positive treatment is concerned, little more is necessary. He protests, on the one hand, against "ardent spirits and stimulating drugs" to bring out the eruption, "or to guard against the supposed danger of the measles" striking in; and, on the other, against the pernicious custom of using purgatives to cleanse the system after the disease has abated, whether the bowels are costive or relaxed.

The measles, about Boston, no less than the scarlet fever, has been, of late years, unusually severe. Of 1,919 deaths in the city of Boston in the year 1841, no less than 87 were from measles, — the same number as those from scarlet fever, or scarlatina. How far it has come under the treatment of that quackery which is ever ready to administer to it, — almost always wrongfully, — and how far it has been left to nature, or treated by the regular physicians, I am unable to say.

There is, every where, a great deal of fear and

apprehension about the measles striking in, as it is called; and I have not a doubt that the mortality of the disease is greatly increased by an unreasonable degree of this feeling. It is certainly unfavorable to have the eruption disappear or recede suddenly, very early in the disease, say during the first day or two after its appearance. And yet, should it be attended by no constitutional disturbance, such as tenderness at the *pit of the stomach*, (the epigastrum, rather,) vomiting, or diarrhœa, there is no necessity for apprehension. The disease will, in all probability, proceed favorably, notwithstanding the disappearance of the eruption.

I have said that the only two diseases common among us, with which measles is likely to be confounded, are influenza and scarlatina. From the first of these, in fact, I do not see how we can distinguish it, except by the final appearance of the eruption; but it is different with regard to the second.

Still, it is not at all difficult for a medical man to make the proper distinction between even measles and scarlatina. For not only are the sneezing, the watery eyes, and the cough, absent in scarlatina, but the redness in the latter is much more bright, — scarlet like, — as well as more uniform, and the skin, though more swelled, feels smooth; whereas there is a perceptible roughness of the skin in measles. The eyes, moreover, are more sensible to

the light, and are filled with tears more readily; and the throat is not so sore in measles as in scarlatina.

Those parents who have it in their power to choose the season for receiving this never-welcome visitor into their families, should select either the latter part of the spring, and the early part of summer, or the month of October; for, other things being equal, it is certainly more apt to be mild in very pleasant weather than in other circumstances. But whether it is best to avoid the disease on any other account, may be questioned. To me, however, it seems desirable that it should make its attacks early in life; and, perhaps, the earlier the better.*

Perhaps it may have been understood, ere now, that not only measles, but chicken-pox, kine-pox, mumps, and quinsy, — in fact, almost every disease to which infancy and childhood are subject, — are rendered more mild by a previous life of rigid temperance. Not only is it necessary that the subject of disease should have been temperate, but his parents, also, before him. There are facts which go very far towards proving that, where the parents have abstained, like certain individuals of old, from all wine and strong drink, as well as from all high-seasoned and stimulating food, and trained their families to the same habits, the diseases of infancy

* Some consistent vegetable eaters, who are desirous of acting up to the spirit of this suggestion, are unable. Their children will not *take* the disease, though often exposed.

and childhood — not excepting small-pox and cholera, should either of these make their attacks — will be light and innocuous in nearly the same proportion.

Croup, or Rattles.

"CHILDREN of a florid complexion, and enjoying high health, and especially those inclined to be fat before two years," are more obnoxious to croup, according to Dr. Dewees, "than those of an opposite temperament." Dr. Eberle says that florid, robust, fat children are more liable to it than those who are of a contrary habit. And it is a very common observation, not only among medical men, but other people, that fat children are more subject to croup than others.

But what is here intended, by Dr. Dewees, by high health? Can it be that the more perfect the health, the greater the exposure to croup? This can hardly be believed. To suppose that health predisposes to disease would be very strange. Yet this is, to some extent, the impression which is abroad in the community, and I have no doubt it is deepened and confirmed by a hasty perusal of these doubtful passages of medical writers.

But let us consider a moment. Neither Dewees nor Eberle affirms that high health or a robust habit

favors the appearance of croup more than a medium degree of health, but more, rather, than the *opposite* condition. Low health, thinness, and paleness, seem less likely to be the precursors of this disease than the opposite state. Not that they are less likely to invite other diseases, but only that they do not favor this.

An important fact, however, in reference to fat children, is, that they are not really robust, or in perfect health, as many suppose, and as it is probably supposed by not a few medical men. Fatness in children, beyond a certain degree of plumpness, — which last is certainly desirable, — is not only in itself a disease, but it predisposes to other diseases; especially that which is the subject of the present article.

Croup makes its attacks most frequently during the first four or five years of life; though it is occasionally met with much later. It more generally comes on either in the latter part of the evening, after a short, disturbed sleep, or at about two or three o'clock in the morning. I speak here, however, of what may be called the paroxysms of this disease; for there is often an incipient stage of it which is not so abrupt or violent. This incipient or forming stage cannot easily be distinguished from a common cold or catarrh, or from the coming on of the measles. A sudden exposure to cold or damp, or a sudden check to the perspiration, is enough to excite it; and,

it is believed, to bring on the severe paroxysm of which I have spoken.

I need not mention the particular treatment of this disease while in its forming stage; it is sufficient to refer the reader to the article on Catarrh, and to the treatment of other diseases which commence with catarrh. I will only say that, so long as the appearance is that of a common cold merely, it may be hoped that a little more abstinence than usual from food, with a little more than our usual care to avoid that which is heating and stimulating, will prevent its assuming a more dreadful as well as dangerous form.

But if a whistling noise, in drawing in the breath, comes on, like that of air passing through a brass tube, and if at every breath the breast bone seems drawn in, so as to form a hollow or cavity at that part, we should lose no time in seeking that counsel on which, in the most alarming circumstances of danger, we are so wont to depend. What is done must be done quickly, or the disorder will have its course, and will proceed, for the most part, to a fatal termination. Even the best medical skill will usually be found impotent.

From the fact, however, that it makes its severer attacks at so late an hour, and withal so suddenly, it would seem desirable that something should be done by mothers before a physician can be procured. And one thing may, I am sure, be done with safety,

if not with benefit. Flannels wrung out in water, nearly as hot as the hand can bear,* may be applied to the upper part of the chest, and changed as often as they grow cool in the slightest degree, taking care to keep up as regular a heat as possible. By this means have the most severe symptoms been often palliated, and, in a few instances, the disease removed. I have heard of the application of cold flannels for this purpose, but have reason to fear that they would seldom have a favorable effect.

Fortunately for the world, especially the world of the young, the croup is not, like measles and whooping cough, communicable from one person to another. Were it so, it would make wide-spread havoc among us, since multitudes who now escape it, especially the feeble and sickly, would be among its early victims.

It has been usual for writers on children's diseases to dwell at considerable length on what they call the *diagnosis* of this disease; but I have so little hope of good results from any domestic treatment in the present dearth of just physiological knowledge, that I am entirely unwilling to say more, except it were to warn mothers to avoid, especially in corpulent children, all those causes which tend to invite and push on to a crisis this terrible malady.

* I must give a word of caution, even here. The hand of an old housekeeper will endure a degree of heat which would blister the skin of a tender infant.

Of obesity, as a disease, as well as of catarrh, — two fruitful causes of human suffering, — I shall speak at greater length under their respective heads.

Whooping Cough.

This disease, which is almost exclusively a complaint of childhood, begins, like croup, and many more diseases, with the symptoms of a common catarrh, or cold. The child at first feels more or less of languor, and is affected with headache, sneezing, and a degree of hoarseness. Its sleep is disturbed by dreams and sudden starting, its appetite becomes weak, its bowels sluggish, and there is a slight degree of fever, especially towards evening.

For the first two or three weeks, the cough is almost always dry and ringing, and the fits of coughing, or paroxysms, are short, and free from that peculiar sound which is called *whooping*. At length, however, the disease begins to put on more of a convulsive or spasmodic character, so far, at least, as the mere cough is concerned. The paroxysms of coughing now come on more frequently, and are of greater duration than before. During the paroxysms, it is often extremely difficult to breathe, and the child seems, at times, to be in danger of actual suffocation.

The approach of a fit of coughing is generally

known by a peculiar sensation of tightness in the chest, accompanied by a degree of tickling at the top of the throat, and in the region of the heart. The duration of a paroxysm is various, — from half a minute, or so, to five or six minutes, and even more, — and is terminated by the discharge of a quantity of mucus. There is, also, some pain in the chest, as soon as the cough has subsided.

Sometimes, however, the coughing continues till it produces vomiting, which, when it happens, immediately gives relief. At other times, blood bursts out at the mouth and nose. In a few cases, there is, for a few moments, insensibility, and, perhaps, a degree of suffocation; and, in a smaller number still, there are convulsions.

In this aggravated state, the disease usually continues from four to six weeks, when it begins gradually to abate. The decline of the disease takes up from two to four weeks more. Fever is not always present, though there is sometimes a degree of it.*

It is impossible, of course, for a disorder like this, if at all severe, to harass the infantile or juvenile constitution from two to three months, without inducing a vast amount of suffering. Still, it frequently happens, after all, that the disease is com-

* The foregoing excellent description of the rise and progress of this troublesome disease is derived chiefly from Dr. Eberle.

paratively mild, especially in the mild season. I have even seen it little more troublesome than a common cold, and have known it to pass away almost as soon.

This disorder seldom proves fatal, notwithstanding its severity; and yet it is occasionally so. Where it follows immediately, or almost immediately, after measles, — a thing by no means uncommon, — and when, in its crisis or turn, it is followed by hydrocephalus, throat distemper, croup, lung fever, apoplexy, or consumption, the consequences may be fatal; indeed, it requires a pretty strong constitution to withstand such consequences. The danger is, moreover, greater during the wet and variable seasons of early spring and late autumn, and in northern, cold, or damp climates, than in the contrary circumstances and situations. It is said, for example, with regard to climate, that nearly six thousand deaths from this disease have sometimes occurred in Sweden in a single year.

The greatest danger, other things being equal, is in the case of very young children, and those who are scrofulous or consumptive. This is contrary, in part, to the rule which obtains in several children's diseases, that the younger they are, the better they endure them. Hydrocephalus, also, sometimes sets in, and destroys the patient.

The medical profession are divided on the question whether the long course of this disease can be

materially shortened by medicine; but the greater probability is, that it can be. The question would still recur, however, whether it can be done with perfect safety. I do not believe, for one, that it can be. At any rate, I cannot encourage mothers in any attempts to shorten it.

Eberle's recommendation, in regard to treatment in the early stages of this disease, is very brief. He only says, "The diet should be light and digestible; and it is particularly important to guard the patient against the influence of a cold, variable, and damp atmosphere."

Dr. Dewees says, "The most abstemious diet should be observed during the whole of the catarrhal stage of this complaint. Children at the breast should receive nothing but the mother's milk; those who are weaned should be confined strictly to a milk and vegetable diet. All animal food, or broths, must most scrupulously be avoided. Rennet whey is preferable to whole milk. The drinks should be barley water, flaxseed tea, gum-arabic water, bran tea, toast water, or molasses and water."

Dr. Buchan goes more into detail. He observes, in the first place, that such children as live upon thin, watery diet, breathe unwholesome air, and have too little exercise, are most liable to the disease, and generally suffer most from it. In the next place, he says,—

"Whatever hurts the digestion, obstructs the

perspiration, or relaxes the solids, disposes to this disease; consequently, its cure must depend upon cleansing and strengthening the stomach, bracing the solids, and, at the same time, promoting perspiration, and the different secretions. The diet must be light, and of easy digestion.

"One of the most effectual remedies is a change of air. This often removes the malady, even when the change seems to be from a purer to a less wholesome air. This may, in some measure, depend on the patient's being removed from the place where the infection prevails. No time ought, therefore, to be lost."

There is some slight difference of opinion among medical men, in regard to the usefulness of a change of air during the *early* stage of whooping cough; and there is a still greater difference in the practice of mothers. After the first week or two, however, (during which it should be treated like a severe cold,) it cannot be doubted, by any who have observed for themselves, that children ought to have the full benefit of free air during the whole progress of the disease, provided, always, that proper caution is used in regard to dampness and currents.

Little can be done, during the progress of the disease, — I mean to any good or practical purpose, — beyond what has been mentioned in the preceding paragraphs. The child, it is true, should be kept clean, as in other children's complaints; and it will

be well to soak the feet five to ten minutes in warm water, on going to bed,—at least two or three times a week.

Very young children should be laid, during the night, with their head and shoulders raised, and should be cautiously watched, so that, when the cough comes on, they may be held up on their feet, at the same time bending forward a little, to prevent suffocation.

Scarlet Fever.

Scarlet Fever, scarlatina, or canker rash, like many other diseases to which children are more subject than adults, is not, however, by any means, confined to them; for it attacks persons of all ages under forty. It is a very troublesome disease, and not unfrequently fatal, sometimes in twenty-four hours. Physicians dread it almost as much as they do the small-pox.

There are, however, various forms of it: 1. simple scarlatina, or canker rash; 2. scarlatina anginosa, as it is called in books; 3. malignant scarlatina, or, as it has, at times, been denominated, the *black canker*. It is the former of these with which maternal treatment has principally to do. The last mentioned is usually out of the mother's reach, and too often beyond the reach of the physician.

In simple scarlatina, or canker rash, the disease begins with chilliness, a fulness of the head, and loss of bodily strength, followed, sometimes, with nausea and vomiting. The surface of the body soon becomes red and hot; and the redness, on examination, will be particularly discernible at the top of the throat, and about the roots of the tongue. The tongue, in this disease, according to Dr. Dewees, has a very peculiar appearance, which I am the more anxious to mention, on account of the difficulty which is often felt of distinguishing it from the measles — to which, indeed, I have already alluded. The peculiarity referred to consists in an apparent projection of the papillæ, or little eminences of the tongue, through the fur which is upon it, presenting the appearance of so many points or specks, of an intensely-deep scarlet color. In this mildest form of the disease, the mouth and throat are not affected any further than has been mentioned above.

I have already dwelt at sufficient length on the difference between scarlet fever and measles, in treating of the general character of the latter, so that nothing need be said on that subject in this place. There is no great difficulty in distinguishing the two diseases.

In this mild form of scarlatina, little, if any, medical aid is necessary. Even when it becomes scarlatina anginosa, or, in other words, is attended with sore throat, I have seen it yield to the most simple

treatment, consisting in a due attention to diet and other physical habits, with a little gargling of the throat. I have, indeed, seen one case of scarlatina anginosa, of considerable severity, in an adult go off in a few days, under this simple course.

Dr. Maunsell says, "The patient must be kept in bed, but not oppressed with an unusual quantity of clothes. The apartment should be cool and well ventilated, cooling drinks given freely, and abstinence from animal food, and every thing heating, strictly enjoined." In another place, he commends sponging with cold water in the paroxysms of fever. He even objects to a stimulating diet in the sequel of the disease, except in particular cases.

Dr. Buchan observes, "There is seldom any occasion for medicine in the mild form of this disease. The patient ought, however, to keep within doors, to abstain from flesh, strong liquors, and cordials, and to drink freely of cool, diluting liquors."

Dr. Dewees, along with a little medication, insists strongly on a regulated diet, in connection with which he observes, "By a regulated diet, we mean a strict antiphlogistic one; that is, an entire forbearance from animal food; from every kind of liquor whether fermented or distilled, and from spices of every species."

When the disease becomes severe, it is exceedingly apt to terminate in deafness, swellings of the lower extremities, dropsy, and other serious affec-

tions. These, however, with all the other evils that render scarlatina anginosa, or even the malignant scarlatina, more dreadful than simple scarlatina, may be greatly mitigated by observing, from the first, a very simple diet. Even when there are extensive and serious swellings of the lower limbs, we find judicious medical men insisting on "persevering in a milk and vegetable diet, and in suitable and well-regulated exercise."

Nettle Rash, or Urticaria.

I HAVE already urged the necessity of withholding fruit from young children, especially while they have no teeth, and their food is principally milk. And yet, such is the propensity, every where, to indulge children in every thing which we ourselves use, that I greatly fear the public will need line upon line, and precept upon precept, before they will govern themselves, in this matter, as they ought. Long, as I have reason to fear, will it be before ignorant mothers and foolish nurses will cease to masticate a strawberry, a raspberry, or a cherry, now and then, and impose it upon the dear little creature who *so dearly loves it*, notwithstanding he scowls terribly at the first impression.

These cautions are especially necessary, with

reference to the prevention of urticaria, or nettle rash. This disease is particularly apt to attack those children, who, during the season of teething, are indulged in the use of summer fruits. Nettle rash is thus defined by Dr. Good: — "Rash, in florid, itching, nettle-sting weals; appearing about the second day; irregularly fading and reviving, or wandering from part to part; fever, a mild remittent."

I have mentioned teething in connection with this disease, because children are least able to endure fruits while teething continues. But it is not at all likely that teething alone will bring it on. It is the consequence of improper eating. For proof that it is so, we find instances of its attacking adults, with whom, of course, teething could have no influence. Dr. Dewees mentions a man in whom boiled young cabbage in the spring, or a draught of cold lemonade when the body was over-heated, or the eating of even a boiled chicken, would bring on the disease.

I have no doubt that the form of eruption vulgarly called *prickly heat*, which affects some persons in hot weather, is owing to similar causes. It would seem from the testimony of Dr. Beaumont, who made large experiments on the stomach, that, whenever that organ is somewhat debilitated, almost any substance which is indigestible will produce a rash. If I am not very much mistaken in regard to its causes, I have known it produced by cider and other fermented and alcoholic drinks.

From what has been said, we may easily gather the general plan of a rational treatment. First, avoid the causes, if you know what they are, whether summer fruits or something else. If the case is that of an infant at the breast, let it be confined to the breast as much as possible. If old enough to use other food and drink, let the former be chiefly milk, or milk and plain bread; avoiding, at the same time, sudden or great changes of temperature, and currents of either cold or damp air.

As to the local treatment, I have seen great good done by rubbing the parts affected with dried or scorched wheat flour several times a day, and even by the application of the flour without the friction. It appears to act as an absorbent of any poisonous substance which may exude from the surface through the pores, or perhaps even in other ways, to us unknown.

It is highly important to prevent this troublesome complaint from becoming habitual, especially in early life. To this end parents cannot be too strict, or the young too self-denying. For want of a little parental care and juvenile self-denial, eruptions of this sort sometimes become our inheritance for life, and are even transmitted to others; or, at least, we transmit a skin predisposed to be easily irritated.

It is also of very great importance to avoid medicine. A thousand specifics will be offered by mothers — saying nothing of apothecaries, quacks,

and physicians who are out of business — which you will be exceedingly tempted to try. I have known a severe case of erysipelas come on — ay, and felt it too, for I was the subject of it — one which came near the destruction of the patient by the application of a wash, several times, to the skin, for the purpose of curing urticaria. The wash, however, was a solution of corrosive sublimate! — The physician had been applied to, again and again, and had as often prescribed mild means, without success, till at last, feeling, perhaps, that his reputation or skill was in jeopardy, he proposed the poison.

Catarrh, or Cold.

Catarrh,* or catching cold, is by no means a disease peculiar to infancy or childhood; yet, from its frequency, its tendency to be kept up by habit, and the little regard usually paid to it by those who have the care of children, it richly deserves notice in a work of this kind.

* Many individuals have attached a wrong definition to the word *catarrh*. They suppose it to mean a chronic affection of the membrane at the back part of the mouth, between it and the nose, which permits of the collection, and sometimes the temporary adhesion, of a quantity of tenacious mucus. This last is the *effect* of catarrh, — very often aggravated by snuffing or chewing tobacco, — but not catarrh itself.

In speaking of diarrhœa and its causes, as well as in several other places, I have alluded, rather indistinctly, to the nature of catarrh, and also to some of its causes. Still, a more particular account of it will be needful; for, to say nothing of its own inconvenience or danger, it lays the foundation of many other diseases, still more troublesome and dangerous.

In order to explain clearly the philosophy of taking or catching cold, it is necessary just to observe that, in a state of perfect health, there is a fluid constantly passing off from the surface of the human body, called, for want of a better name, the matter or fluid of perspiration. Now, when, from any cause whatever, known or unknown, the passages, or pores, by means of which this fluid is wont to escape, become obstructed, the labor of carrying out of the body that fluid which ought to have been carried out by the skin, is thrown upon some other part; and such is the law of the human economy, — especially the law of sympathy, — that this extra work, or work of charity, is always performed by mucous membrane, a species of membrane resembling the skin in its general structure, and which lines all the parts or cavities of the body which open to, or communicate with, the air.

Why the work of freeing the system from the matter of perspiration should devolve upon one portion of this mucous membrane rather than upon

another, may, perhaps, be best explained by saying that it usually falls on the weakest point of this extensive membrane; or, what is more certain still, the weakest part soonest tires under the new and unreasonable task of doing that for another part which ought to be done by itself. If the nasal membranes are weakened, from any cause, known or unknown, they soon give out, as it were; if the lining membrane of the lungs, it ceases to perform its office, and disease of the lungs ensues; if that of the bowels, they become diseased; and so on. This diseased action — induced by endeavoring to perform, in a state which is already one of great feebleness, the work of others — is called having a cold. Thus there are colds *of the head*, (or on the nasal membrane,) *of the throat*, and *of the lungs;* and we might, with equal propriety, say, were it customary to say so, colds in the eyes, ears, stomach, and bowels.

While, however, we say that a cold is caused by an obstruction of the perspiration, it is desirable to seek, a little more particularly than we have yet done, for the causes of this obstructed perspiration; for it is here, in the work of preventing this obstruction in infancy and childhood, (if not, in fact, at every age,) that mothers can do most for their children with respect to catarrh.

Whatever weakens the skin may obstruct the perspiration. Whether a mere stopping up of the

pores — as when we oil the surface, or immerse our bodies in warm water — will produce the ill effects which we call taking cold, is somewhat doubtful; for nations have been accustomed to oil their skins, who did not appear to suffer from colds more than other nations. And yet it is difficult to see how a permanent obstruction, of even this sort, can fail to throw an undue proportion of the work of depurating or cleansing the blood upon some other organ, lined with mucous membrane, especially the lungs. Perhaps it always does so; and, though we have no accounts on record of greater suffering from colds among those Oriental nations who have been accustomed to the use of oil, externally, it is quite possible that, if the truth of the case could be ascertained, it would be found that they were the more subject, on account of it, to one disease or another of parts lined with mucous membrane, or sympathizing strongly with those which were thus lined.*

Neglect of cleanliness must, I suppose, produce mischief in the same way. Dr. Combe relates the case of an individual who was the subject of chronic diarrhœa, as the result of neglecting the skin; although I do not know that it ever occurred to him,

* I do not forget here what is said by Dr. Darwin and others, — that we may destroy worms and other lower animals by covering them with oil. But we must remember that *they* breathe almost wholly through the openings or pores of the body, while man only does so in a very limited degree.

or to any one else, to dignify such a bowel affection with the name of catarrh, or cold.

Cold air, however, and damp air, especially in currents; lying upon the ground when the body is greatly heated, and the ground damp; going out of rooms heated to excess, and remaining inactive, especially with a deficiency of clothing; reducing too suddenly our usual quantity of clothing; sleeping with too much clothing during the early part of the night, and with too little the latter part; sleeping where the night air falls in currents upon the bed; allowing the bed-clothes to get wholly off during the night; drinking warm drinks, or taking into the stomach any thing which excites increased action, and throws open the pores too much; going into cold water while hot, and, at the same time, fatigued; — these, and numerous other causes, are liable to lead to a suppression of the perspiration, and, by consequence, to those results which are denominated taking cold.

"No age, sex, or constitution," says Dr. Buchan, "is exempted from this disease; neither is it in the power of any regimen or medicine to prevent it. The inhabitants of every climate are liable to catch cold; nor can even the greatest circumspection defend them at all times from its attacks. True it is that, if the human body could be kept in a uniform degree of warmth, such a thing as catching cold would be impossible; but, as that cannot be

effected by any means, the perspiration must be liable to many changes."

Dr. B., however, is a little too skeptical in regard to the practicability of preventing catching cold. I admit, indeed, with him, that we are not now able to prevent it *at all times*. Still, I am compelled to believe and assert, that a proper regimen, and proper habits, duly persevered in, will do a great deal; and, from what I have seen and known, I should not be willing to say with confidence what cannot be done hereafter.

I have known those who, by a judicious commencement and steady perseverance in the use of the cold bath, became almost entirely freed from long slavery to this habit, even in the worst of climates. There are many other things, however, besides cold bathing, which have a tendency to harden us against taking cold. The use of but little drink, and that not heated; the use of mild, and rather cool, food; the avoidance of hot and confined rooms, and of too much clothing by night or by day; the constant indulgence of hope and confidence, to the exclusion of fear, languor, or melancholy; and a great deal of out-of-door exercise, are among the things which go to produce the same effect with daily cold bathing, especially when accompanied by it.

But it is time to consider, briefly, the treatment of a cold, when it has actually arisen. There is

no disease which more seldom requires medicine; and yet there is no disease which requires — in order to prevent disastrous consequences — more careful treatment.

Some treat every cold alike, in all its various stages, and in all circumstances of age, constitution, season, and climate. This, surely, cannot be right. What would be safe in the strong, robust adult, might destroy an infant, or even a youth who was delicate.

I know one man, a sensible man, in the main, too, who makes it his constant practice, when taken with a cold, to "freeze it to death," as he calls it. To explain: Before going to bed, he strips off his clothes, and, in the coldest weather, walks in the cold air, barefooted and nearly naked, till almost frozen, and then retires to bed. This method, he says, is sure to remove his cold; and I have no doubt it may do so, by the reaction it produces. For, on going to bed, after so much exposure and cold, a perspiration will almost inevitably break out, and with it the cold will be likely to disappear. Now, though this method is successful in the case of a single individual, a man of great firmness of body and mind, it does not follow that it is the *best* method, even for him; indeed, I am sure it is not. Still less does it follow that it would be the best, or would even be safe, for a feeble son or daughter of his; although,

from its efficiency in his own case, he would be very apt to recommend it to others.

Others procure the desired reaction by drinking, on going to bed, a very large quantity of cold water. This is about as much less hazardous than the former mode as drowning is less painful than freezing. I cannot recommend either the one or the other.

Others drink a very large quantity of hot drink on retiring, and, perhaps, add external heat afterward — the object being to induce a violent perspiration; while others still, for the same end, use the vapor bath, or the steaming process, as it is called. These last methods are usually successful, except, perhaps, with the very feeble individual; but they are apt to strain, if not to "crack," the constitution, at least if frequently repeated.

Many attempt, says Buchan, to cure a cold by getting drunk; but this, to say no worse of it, is a hazardous experiment. No doubt it will sometimes succeed, by suddenly restoring the perspiration; but when there is any degree of inflammation, which is frequently the case, strong liquors, instead of removing the malady, will increase it; by which means a common cold may be converted into an inflammatory fever.

As I have already said, no one method of cure can possibly be adapted to persons of all ages and circumstances, and of every degree of vigor. There is, indeed, one main point to aim at, viz., to restore

healthy action to the surface of the body; but it is a point which may be reached by many different roads. The following general rule may, perhaps, apply to as many cases as any other: —

"When oppression of the breast, a stoppage of the nose, unusual weariness, pain of the head, &c., give us reason for believing the perspiration to be obstructed, or, in other words, that the person has taken cold, he ought immediately to lessen his diet, or at least the usual quantity of his solid food, and to abstain from all strong liquors. Instead of flesh, fish, eggs, milk, &c., he may eat light bread pudding, veal or chicken broth, panado, gruels, and such like. His drink may be water gruel, sweetened with a little honey, an infusion of balm or linseed, sharpened with the juice of bitter orange or lemon, a decoction of barley and liquorice, with tamarinds, or any other cool, diluting, acid liquor. Above all, his supper should be light, as small posset or water gruel sweetened with honey, and a little toasted bread in it. The patient ought to lie longer in bed than usual, and to encourage a gentle (not profuse) perspiration.

"I have known this practice carry off a cold in one day, which, in all probability, had it been neglected, (or tampered with by medicine,) would have cost the patient his life, or (at least) would have confined him to his bed for some months. Would people sacrifice a little time to ease and warmth, and practise a moderate degree of abstinence when the

first symptoms appear, we have reason to believe that most of the bad effects which flow from an obstructed perspiration might be prevented."*

There is an extreme, however, to which this method of treatment may be sometimes carried. When, for every slight cold, we confine ourselves or our children to warm beds, or even to warm rooms, and drink large quantities of warm liquor, or eat too much liquid food, it may occasion more of evil than of good to the system. It will be advisable, on the contrary, to use gentle exercise, and, if the weather is not particularly bad, to be abroad, a good share of the time, in the open air.

I must say one word in regard to the error of the common maxim, "Feed a cold, but starve a fever." Most colds, or catarrhs, are fevers in miniature, especially at first. If, then, a larger fever ought to be starved, why not a smaller one? Or, if the one ought to be fed, — *stuffed*, as some say, — why not the other? Let us at least be consistent.

Let us, above all, avoid the candies, and cough drops, and hot drops, of the stores, the confectionaries, and the grog-shops. Let us do what we can in the way of diet and regimen, and when this fails, if fail it should, let us either leave the case to nature or the family physician.

* Buchan's "Domestic Medicine," p. 203.

Debilitating Discharges.

Discharges of the kind referred to are by no means uncommon or harmless, especially among the female children of large towns and cities, where the modes of life are more arbitrary and exciting, and consequently less favorable to health. They are sometimes the result of catarrh; for we have seen, in the preceding chapter, that there may be a determination to any part which is lined with mucous membrane. But they are also, in some cases, the result of *inheritance*, and in, perhaps, a few cases, though I think rarely, of accident. By far the most fruitful cause of this disease, however, in children, is a neglect of proper cleanliness.

There is yet a great deal for parents to do, in the way of preventing and even mitigating disease, not only in themselves, but in their children, by a due regard to cleanliness in every particular. Suffering an infant to become diseased by remaining too long wet or otherwise unattended to, is a practice which, above almost all others, deserves the severest reprehension.

Washing, if practised steadily and perseveringly, three times a day, will not only prevent fluor albus, but, as I believe, often cure it, and that, too, without the aid of medicine; although I have in my possession mothers' books, which tell us about using

mercury, cantharides, sulphurated zinc, &c.* Cleanliness, with pure air, moderate exercise, and a milk diet, is believed to be abundantly sufficient to effect a cure. For children a little beyond the breast, some of the books are a little more particular with regard to diet and regimen. One author says, and with much good sense, "The diet must be plain, light, and nutritious; but all salted meats, and all hot, high-seasoned dishes, must be avoided." †

Hernia, or Rupture.

Under this head I propose to treat briefly of two different forms or modes of the disease, viz., umbilical and inguinal hernia.

The first form of the disease is quite frequent, and is caused in various ways. Among these causes are, holding the child in a bad position; bandaging the belly too tightly or too loosely, and much crying. When any or all of these causes are applied to a child of somewhat feeble constitution, the bowels are apt

* What nonsense! I never refer to one of these abominable prescriptions without resolving not to notice another.

† There is the greater necessity for preventing or curing this disease with alacrity and promptitude, from the consideration that, when neglected, it is believed to lay the foundation for a more severe and harassing disease of the same kind, at a more advanced period of life.

to protrude more or less; and sometimes to an extent which is truly alarming, especially to the young and inexperienced mother.

Now, as it is in the case of most other diseases, we are to look first for the causes, and attempt their removal; and, having done this, we are to seek for some method of support to the weakened and protruded part.

I have succeeded best in the following manner. I have taken a very thin piece of sheet-lead, such as that which lines tea chests, and, having cut out a circular piece, of a diameter somewhat greater than that of the opening into the abdomen, have sewed it up in cloth, or rather in several thicknesses of cloth, and applied it, under the bandage, to the region of the hernia. Worn a few weeks, the hernia usually disappears.

The explanation of the cure is as follows: The bowels being kept from crowding upon the muscular edges of the covering of the abdomen, (the rim of the belly, as it is called,) the edges of the muscles, which had before become either absorbed or thinned away, and greatly weakened, now gain strength and extend till they gradually fill up the opening.

Inguinal hernia is not so common as umbilical, but more difficult to manage or to cure. It may take place at almost any period of life, but is most frequent and troublesome in early infancy; and sometimes it is troublesome from birth.

For this complaint — whatever may be the age — the more skilful practitioners will recommend a truss, to be worn day and night till a cure is effected. Let it not be done, however, without the most minute directions from the practitioner how to use it.

I am not ignorant that, though occurring very early in life, this affection has sometimes been left to nature — wholly so. When left thus, however, I have never known a spontaneous cure till about the period of puberty. At that time, if unreasonably severe exertions have not been made, a cure will more generally take place; but I am not sure that there is not more danger of a recurrence than there is when the truss has been early, and wisely, and perseveringly applied.

Chilblains.

A VERY common complaint among children has obtained the name of *chilblains*. I need not describe it; no one will mistake it for any thing else.

There are various causes of this troublesome complaint; but, perhaps, the most frequent is the application of long-continued cold. Children who sit remote from the fire at school, and are too diffident to ask to warm themselves, are apt to suffer in this way, especially when, owing to a bad floor, the cold

air rises through its crevices. Perhaps this cause is little less fruitful of mischief than one more — that of warming their feet and hands, when they are very cold, too hastily. There is a general disposition in the young — and sometimes in older persons also — to get warm suddenly; they have not patience to wait. They should be taught to get warm by exercise rather than by the fire; and, when at the fire, that the more slowly they warm themselves, the better.

When we have learned, by former experience, to foresee that there is danger of exciting this troublesome disease, woollen stockings should be put on very early in the autumn; and the hands should be secured by warm gloves or mittens. Care should also be taken to have the shoes soft, and to have the feet warm by night, as well as by day.

If proper pains were taken to prevent chilblains, I do not believe they would become a source of suffering, in any considerable degree. Though they would occasionally appear, they would soon pass away. They would not, at all events, be apt to break, and require the aid of surgery or medicine.

Protrusion of the Seat.

This disease, described in books under the various names of prolapsus ani, protrusion of the rectum,

&c., is one of the most troublesome affections with which mothers have to contend; and, unfortunately, is rather frequent. It consists in the descent, or falling down, of the inner coat of the bowels, sometimes to the extent of several inches. For as the inner coat of the bowel is longer than the external, whatever causes the child to exert himself too much while this membrane is weak, is apt to cause a protrusion. Hence the frequency of this complaint after dysentery, accompanied with tenesmus, as well as after other bowel complaints of long standing, which have induced debility.

But there are other, and perhaps more frequent, causes of this troublesome disease. One of the more fruitful is the early use of purgatives. Yet thousands of parents give the latter, in full confidence of their good effects, who have not the least idea of tracing a complaint, which makes its appearance weeks or months afterwards, to their early and hasty use. Calomel, aloes, and jalap, are all dangerous medicines to the young in this respect. So are some medicines which do *not* purge — emetics and anodynes. The latter, especially all the preparations of opium, produce this effect by drying the membrane, as it were, and inducing costiveness; and whatever induces costiveness favors the protrusion. It is also said that worms will produce the disease, or even a stone in the bladder.

At first, the protruded bowel will often return of

its own accord; but when its descent has become habitual, it will, in some instances, not only descend from the slightest causes, but remain. In these circumstances, the sphincter, or extreme portion, by contracting upon it, acts as a sort of ligature, causing swelling and pain, and a most alarming appearance.

The first object, as soon as the disease is discovered, should be to prevent, if possible, its recurrence. The causes which have been mentioned, such as harsh or drying medicine, should be avoided, in the first place. Next, the diet should be such as will prevent the smallest approach to costiveness. If the child is at the breast, it may be well to substitute for breast milk, once or twice a day a little cow's milk, considerably sweetened, and somewhat diluted; if not, in addition to the last, it will be desirable to add hasty pudding, or wheat or rye mush, sweetened with molasses. Lastly, it is recommended, by some, that nature's calls upon the child should be regarded in a standing position. But this last, with many children, will be extremely difficult.

When the descent of the bowel has become at all habitual, it will be necessary to watch, with great care, and to return it, as soon as possible, lest constriction, or, as some call it, strangulation, should arise, and the pain and trouble which always accompany it.

The method of return, if attended to seasonably, is very easy and simple. The following description

of it is but slightly varied from that of Dr. Dewees, and is one of the things which every mother ought to understand: —

The child must be laid across the lap, with its head a little lower than its hips. The part must then be lubricated by sweet oil, or by hog's lard, and a piece of fine linen may be laid over it. We may then commence an attempt at restoring it, by making gentle, but continued, pressure in such direction as shall tend to return the bowel within the sphincter. When we have diminished the distended part, by forcing back a portion of the blood in it by our pressure, the bowel must be gently pushed upward, till it is fairly enclosed within the abdomen. Sometimes this operation succeeds best, by placing a point of the forefinger against a portion of the prolapsed bowel, and carrying that portion immediately forward, until it passes the sphincter, or constricting part. After this has passed, another and another portion is carried in the same way, until the whole is restored.

When these methods will not succeed without much handling, — for the tender membrane should be as little irritated as possible, — it will be as well for the mother's skill to give place to that which is presumed to be greater.

Corpulence, or Obesity.

Having already spoken of corpulence as predisposing a child to croup, the way is prepared, more effectually, for the few remarks which I have to make in regard to it, under a separate head.

Corpulence, or obesity, is set down, by many writers, as a disease; but I do not recollect of any, but Dr. Darwin, who attempts to explain the mode in which fatness operates to produce mischief. Dr. D., after saying that obesity is a "dropsy of fat," goes on to observe that the fat operates injuriously, by pressing upon the "veins, arteries, and lymphatics," and, by "distending the skin, causing it to act as a tight bandage over the whole surface of the body." He says, moreover, that fat people perspire less than others.

In any event, corpulence is a disease in adults; and why should it not be so in children? And, if it were not so in children, why should those who are fat be more likely to have croup, and several other diseases, than those which are not so?

There is, no doubt, a difference in children, as well as in adults, by constitutional inheritance. Some are naturally more plump, some less so. And yet, that the far greater part of the fatness of infancy is a diseased fatness, it would be impossible for me to doubt. This fatness is the result of over-

feeding and neglect of exercise. From these two causes combined, most children would die before they are a year old, were it not ordered, in the Divine Providence, that they should obtain that exercise by creeping, which was before denied them; so that, though they are still likely to be over-fed, they will not be likely to fall so soon by the cruelty of *one* foe, as at the merciless hands of *two*.

Still, they will suffer, creeping to the contrary notwithstanding. This I have shown elsewhere. It may be of service, however, to observe that a child, whose habits had been watched, as was supposed, with great care, was once seized, at the age of nine or ten months, with cholera infantum, and recovered only with difficulty. Her parents were, at first, exceedingly perplexed to know how it was possible for a child, who had been brought up so correctly as she had been, to be so severely sick. But, when they came to reflect that she was taken from the breast at six months, and brought up by hand; that, from the time of weaning to the time of her sickness, (about four months,) she had taken a third more food than would have been best for her, and had become exceedingly fat; and that, when, to all this, *in the months of May, June, July, and August,* had been joined teething, — they were not at all surprised at the consequences, and only wondered how it was possible for her to recover.

The treatment, with reference to the prevention of fatness, is, I acknowledge, difficult. Still, I believe something may be done. We may get along with less food than we usually do, if not with so much as a third or a quarter less. I know the appetite of a sucking infant, and even of a weaned child, is exceedingly strong, and can almost subscribe to the assertion of a grandmother, in her "Advice," that children are all "gluttons" by nature; but I must also say, with her, that "perhaps they ought to be." I do not know that we can help their taking rather more food at the breast, and at the sucking-bottle, than we would prefer; at least, without effecting a moral injury, which would be worse than the habit of over-feeding.

But, when they come to the age of two or three years, and can find, without aid, more active employment, it is not so difficult to remove their obesity. Then — to use the language of another writer — we can "let the diet be made less nutritious, and let the quantity of animal food be diminished. Butter, and all other oily kinds of aliment, ought to be avoided, together with sugar and preserved sweetmeats. Exercise should be increased, not suddenly, but by degrees, which will be found very beneficial. In the diminution of the diet, care must be taken to proceed gradually; since too sudden a change may be attended with dangerous consequences."

Scrofula, or King's Evil.

Many persons have no other notion of scrofula than what they have derived from seeing a few individuals with those tumors on the side of the neck, which have usually been designated by the name of *king's evil;* whereas this no more gives a complete idea of the disease, than the sign of a public house gives a correct idea of the character of the house itself. In other words, the local affection is only symptomatic of what is going on within.

Scrofula may be spoken of as existing in two forms — *latent* and *active.* It is the latent form, however, of which I shall chiefly treat in this volume, as it is this which principally concerns mothers with reference to their children.

The scrofulous habit, or latent scrofula, is shown by a peculiar delicacy and languor of the countenance, with a soft, rosy tint of the lips and cheeks, or a pale, soft, flaccid, and apparently tumid, or swelled, aspect of the countenance, with a dull, lead-colored circle round the mouth, and a swollen appearance of the upper lip. The hair is generally fair, with the eyes blue or black.* The head, par-

* Fatness is set down, by some writers, when accompanied by the other appearances here mentioned, as predisposing to scrofula. Nor let those parents, whose children have dark hair and dark eyes, think they are wholly secure from scrofula. The usual causes will sometimes excite the disease, even in them.

ticularly at the posterior part, is usually large, and the temples flattened, or somewhat depressed. There is, in general, an aptness to take catarrhal affections, during which the wings or sides of the nose are apt to become enlarged or swelled. The edges of the eyelids are much disposed to become inflamed; and, where the scrofulous tendency is very strong, the thick, cartilaginous edges of the eyelids are apt to become red and very tender. The digestive powers are usually weak and irregular, and the bowels are apt to be either constipated, or affected with a painful mucous diarrhœa. The appetite, of course, is variable, being, at times, very feeble, and at others, exceedingly strong. A leucorrheal affection, in females, is apt to occur, from time to time, and to prove more or less debilitating. In very young children, excoriations behind the ears, scabby eruptions about the head and lips, obstinate ophthalmia, with a fretful and irritable temper, are among the more common and sure signs of latent scrofula. The growth of the body is usually slow, and, sometimes, for a long period, is scarcely perceptible; but the mind is apt to be exceedingly active, even to precocity. Many a child has owed his success in bearing away the palm, at school, to his latent scrofula.*

This dormant or latent state of the disease may

* In describing this disease, I have been much indebted to Dr. Eberle. See his "Practice of Medicine," vol. ii. p. 452.

continue many years, and, at last, pass off, without terminating in any local or external affections, not even so much as the enlargement of a gland. Thousands of children, in our large cities and towns, — I might almost say every where, in a high state of civilization, — are in the condition I have here described, at least in a degree, and may go through life in this way; and, were it not for a tendency to glandular swellings, — kernels, as they are wont to call them, — would hardly know that they were affected by any particular disease. In these cases, however, it is probable that, for the most part, the disease is inherited.

More generally, the scrofulous habit gradually gains strength, till, at last, it shows itself in what I have called the active form of the disease, of which the following is a brief description : —

The lymphatic glands, along the neck, under the arms, at the groins, and elsewhere, become enlarged, and firm to the touch, especially in the winter, and towards spring. These enlargements — kernels, as I have called them — may, however, remain for years, without either advancing or receding. In general, however, they pass, by degrees, into slow inflammation, which at last terminates in suppuration, or scirrhus. When they suppurate, — which is, by far, the most common mode of termination, — they form chronic, indolent ulcers, from which a thin, milky, and somewhat viscid, fluid is copiously dis-

charged, and which are always extremely slow in healing.

In connection with these tumors or ulcerations about the neck, the eyelids, and lining membrane of the eye, are very apt to become affected with obstinate inflammation; and, in some instances, much irritation exists in the mucous membrane of the nose and bronchiæ. In a more advanced stage, the salivary and thyroid glands, as well as the pancreas, and other internal glandular parts, — the mesenteric glands above all the rest, — become enlarged and hardened. Scabby eruptions appear on different parts of the surface; the extremities of the long bones enlarge; ulcerations occur in the cartilaginous structures; some of the bones become carious; the large joints inflame and suppurate; in some instances, the vertebræ become diseased; and, occasionally, the bones, and soft parts of the nose, palate, and fauces, are more or less rapidly destroyed by ulceration. There is, in short, hardly any part of the body which is not sometimes the seat of the frightful ravages of this disease. The most common forms of active scrofula — the forms, I mean, in which it terminates — are tubercular consumption, white swelling, (or disease of the hip and knee joints,) and ophthalmia.

I have already observed that scrofula is very often hereditary. And yet I do not believe it is so often transmitted from scrofulous parents, as from parents

who are otherwise enfeebled. No fact seems better established than the fact that *whatever tends permanently to derange the digestive powers of the parents*, — whether dyspepsia, or intemperance in any of its numerous forms, — is apt to be the cause of scrofula in children. Hence one reason why scrofula increases in our highly-civilized countries, and especially in our towns and cities, with such fearful rapidity. Hence the reason why so large a proportion of the children in our almshouses are scrofulous; they are the children of scrofulous parents. Hence, finally, the reason why young children, who die in our cities at the present day, are so universally scrofulous; their parents are dyspeptic, or, at least, in some way, and by some cause, debilitated in their nervous systems.

But deficient and unwholesome food is a fruitful cause of scrofula. It was once thought that a deficiency of what was deemed a suitable proportion of animal food, tended to this result; but this idea does not seem to be sustained by facts. Within the last twenty-five years, it has, in general, been insisted that scrofula has its origin in a deficiency of nutriment in the food used, whether that food is animal or vegetable. But even this ground is beginning to be abandoned. Dr. Eberle says, "Without doubt, coarse, indigestible, and irritating, articles of diet, when habitually and freely used by young children, have a much more decided tendency to produce this

affection than mere deficient or innutritious aliment." Are good bread, rice, milk, sago, and even potatoes, coarse, indigestible, and irritating? It is unripe or improper fruits, — greens, celery, cabbage, coarse turnips, bad potatoes, bad bread, cucumbers, squashes, pickles, sour milk, bad meats, &c. &c., — given to very young children, that do the mischief. It is not vegetable food, nor animal food, in the abstract, — or, rather, without reference to quality, — but simply bad food.

Dr. Eberle complains of both the quality and the quantity of food, as inducing scrofula. "By overdistention of the stomach," says he, "or by the use of heavy, irritating, or indigestible food, dyspepsia, and high irritation of the gastro-intestinal mucous membrane, will seldom fail to supervene; and, as this condition of the stomach and bowels is usually attended with a morbid appetite, more food is habitually taken into the stomach than can be digested, and the gastro-intestinal irritation is thus kept up, until the chylopoetic and assimilating functions, and, indeed, the whole system, become intimately deranged. Nothing is more common than to find, in children who have been mismanaged in this way, and who are almost constantly eating, from morning till night, glandular swellings along the neck, and scabby eruptions on the head and face, with tense and tumid abdomens, and other symptoms of gastro-intestinal disorder, where, from the health of the

parents, no hereditary taint can be presumed to exist. There are few children long affected with what is called *marasmus*, (wasting of the body,) who do not subsequently manifest a predisposition to scrofulous affections."

Impure and confined air is scarcely, if at all, less destructive of health and life than bad food or drink. Hence, again, one reason why our cities, and large towns, and manufacturing districts, are becoming more and more afflicted with scrofula, than the less densely populated and more cleanly country. That such is the fact, there cannot be a doubt. Even the domestic animals of cities, according to Dr. Clark, in his excellent work on consumption, are very apt to become scrofulous; and so are the monkeys and other animals in menageries.

Climate, too, has something to do in this matter. Persons born in hot climates, if they afterwards emigrate to cold regions, and remain there long, are very apt to suffer from scrofula. This may, indeed, partly explain why monkeys, and other animals, natives of hot climates, brought here, and kept in menageries, die of scrofulous and tuberculous disease; though it is still insisted that the bad air they breathe has a very great influence.

Finally, many other diseases have a tendency to induce scrofula. I have spoken of dyspepsia already. But measles, scarlatina, small-pox, and whooping cough, evidently have a similar tendency; though,

even here, it is insisted by some that errors in diet, during the stage of convalescence from these diseases, tend more to develop scrofula than the diseases themselves.

In short, — to repeat or lay down the general law respecting causes which operate to produce this disease, — whatever tends to derange permanently the digestive powers in the parent or in the child born to him, and to debilitate the general system of the latter during infancy and childhood, is calculated to bring on scrofula.

As to the fatality of the disease, it is sufficient, perhaps, to observe, that the younger the scrofulous person, the more easy will it be, by a judicious course of conduct, to prevent or remove the disease. So long even as there are no symptoms of disease of the lungs or mesenteric glands, — nothing but a slight enlargement, or ulceration even, of a few external glands, as on the neck, — there is hope the disease will wear out, or in some way be removed. But whenever there is strong reason for believing that the internal organs, especially the lungs and mesenteric glands, are affected, there is little hope of recovery.

I have pointed out the causes of this disease with so much minuteness as to preclude the necessity of saying a great deal about the cure, short of a resort to medicine; from which, however, we can ordinarily expect very little. I will, however, go over with the treatment very briefly.

It is of course too late for the individual to prevent what inheritance has done; but it may be seriously doubted whether that predisposition which is inherited, and which he who inherits it cannot help, would often break out into active disease, if the latter obeyed all the laws of life and health in the strictest possible manner.

In regard to food, it must be mild, but wholesome and nourishing. All kinds of stimulating, irritating articles of food must be carefully avoided; and the same observation applies to every stimulating or narcotic drink. With respect to particular kinds of food, wheat and rye bread, boiled wheat, barley, and rice, boiled apples and turnips, and milk, are, according to Eberle and others, among the best articles of food; to which, if liquids were necessary, might be added various mucilaginous or farinaceous soups.

It is of great importance, and can never be too often repeated, that the meals of scrofulous people should be regular, and that no more should be taken at once than the stomach can easily manage. No oily substances should be taken, nor any thing high seasoned. If flesh meat is used at all, it should be the lean part of some healthy animal, and should be taken, at most, but once a day. Even once, as a general rule, is too much.

Dr. Buchan says, "I must reprobate, above all things, butter, in every form, and other oily sub-

stances, which are so apt to turn rancid on the stomach, loading it with phlegm, relaxing and impeding its action, inducing a debility of the solids, and occasioning a great number of complaints as well as glandular obstructions. One of the worst compositions of which butter or fat always forms a part, is pastry. I really shudder whenever I see a delicate woman, or a weak child, greedily devouring those palatable poisons. Let it be understood that I include in this censure gingerbread, plum-cakes, and all trash of the like kind. Indeed, a child of a scrofulous habit should never eat any preparation of flour, except plain, well-made, and well-baked bread."

"Delicate children," adds the London editor of Dr. B.'s work, — a medical man, — "are greatly injured by the common habit of bibbing too much thin, warm fluid, such as weak tea. They are chiefly enticed to this practice by the sweetness of these drinks. Such children ought not to be permitted to drink any thing sweet or warm. The stomach is braced by cold applications, as well as the skin."

This last idea, that the stomach, as well as the skin, may be braced by cold applications, needs qualification. To strengthen the general system, we should by no means think of keeping the skin bathed in cold water for any considerable time. A sudden dash, now and then, would be all. So, while food moderately warm (as shown elsewhere) is best for the feeble, (avoiding too high a degree of warmth,) occasional cold is useful.

The influence of a dry, healthful air, and equable climate, is of very great importance. A pure country air is desirable, though some have advised the air along the sea-coast. At any rate, large cities and towns should be shunned.

As to exercise, it should be, as much as possible, in the open air. Laboring on a farm, or in a garden, when the person is old enough to labor, is best; but, besides this, walking, and riding on horseback or in an open carriage, are also useful. Early retiring to bed, and early rising, are highly commended, and also the avoidance of the damp, chilly, night air. To most — to the very young, especially — the warm bath, two or three times a week, is highly important. Cold sea-bathing has been recommended, and, if succeeded by a reaction or glow, must be useful. I have insisted at length on the importance of cold bathing in the "Young Mother."

I have yet to speak of clothing. It should be of such a character, and be so regulated, as to preserve the body in as equable a temperature as possible. Flannel should be worn next to the skin of adults, and between the internal and external garments of infants and children. I speak here, however, of the cold, and not the hot season. Flannel may be as oppressive and injurious in July, as it is useful in December.

Dysentery.

Dysentery can hardly be called a disease peculiar to children, I know; and yet, as the diarrhœa of infancy and childhood often terminates in dysentery, and, when it does, is apt to be troublesome, it may be well to treat of it in a cursory manner.

The description of dysentery which seems to me best, is that of Dr. Thomas, in his "Practice of Medicine," — omitting, of course, his views of its contagious nature. It is as follows: —

"The dysentery is a disease in which there is an inflammation of the mucous membrane of the intestines, accompanied with frequent stools, severe griping pains, tenesmus, and some degree of fever; the stools, although frequent, being small in quantity, and without any natural fæces intermixed, but consisting principally of mucus, which is sometimes streaked with blood."

I have not a word to say to mothers of the treatment of so severe a disease, especially when it follows a diarrhœa; for they are, in my view, as a general fact, utterly incompetent to its management. What I have to say will be merely in regard to prevention. So dangerous a complaint should be most assiduously guarded against.

The prevailing opinion, that fruit, of a good kind and quality, perfectly ripe, is a preventive of dysen-

tery, is to be received with great caution.* If it will apply to some children, it will not to all. A great many very young children cannot digest the very best of fruit, in the smallest quantity. Especially is this the case with those who are inclined to scrofula. I know it requires a good deal of firmness, on the part of the parent, to interdict fruit, and a good deal of effort to carry the law into execution; but, whenever a parent is satisfied that food passes undissolved, let him do his utmost to prevent its introduction. Those persons but poorly deserve the name of parent, who, knowing that it does not digest, or even dissolve, and that all undissolved substances in the stomach and bowels of an infant act as foreign bodies, — producing irritation and disease, — will not withhold it. Nor does he deserve to be regarded as a tender parent, who, rather than deny himself the gratification, will continue to tempt a child of this description, by eating fruit, or suffering it to be eaten, before him.

Nothing, however, — not even food itself, — is of more consequence than cleanliness. During the whole of the warm season, — if at no other, — and whether a child is afflicted with diarrhœa or not, it should be remembered that he is more or less exposed to it; and he should be kept clean. Those who have been already inured to cold bathing should

* I have treated on this subject under several of the preceding heads, especially *Diarrhœa.*

persevere in the daily use of that agent, while those who cannot yet bear that with safety should be accustomed to a judicious use of the warm bath.

Clothes, also, at this season, should be often changed, and the rooms which are occupied with our beds and bed-clothes often ventilated or purified. Frequently it is well to wear a flannel bandage around the abdomen; indeed, in all cases where there is a dysenteric tendency, such a precaution is necessary. The night air is especially to be avoided.

A cheerful state of the mind, and pleasant amusement, with such exercise abroad, and of such kinds, as can be safely borne, are also among the things which should be attended to, at a dysenteric season, by every wise and humane parent.

Ear Affections.

I HAVE seen many children who were afflicted with the earache every time they took cold, to an extent which was liable to end — and in some cases actually did end — in absolute deafness. Nor is cold the only cause of this troublesome complaint. It may be occasioned by small substances getting into the cavity of the ear, and remaining there; as small seeds or bits of stick, pieces of chalk, or heads of pins, or even worms, flies, or insects. Sometimes worms are even bred in the ear.

It should be understood, by mothers, that the external ear is essentially a hollow tube, closed at the remote part, like a cup. The bottom of this cup, the membrane of the *tympanum*, as the books call it, or, in plain language, the drum of the ear, is exceedingly tender and delicate, and is covered, as well as the sides of the cavity, with a kind of wax, usually called earwax. In a few cases — but not many — this membrane or drum is found ruptured; but even where it is so, the substances which fall into the ear do not often pass through it; and it is well they do not, for, if they did, the trouble would be greater than it is now.

Still, every thing in the ear is apt to irritate, and in time cause trouble. As I have already said, substances may become lodged in the ear, however cleanly it is kept, and even insects may be caught there by means of the wax. It is only in an uncleanly or unhealthy state of this organ that worms are bred there.

Sometimes the substance in the ear can be seen; for the cavity, though somewhat crooked, is never, in children, so much as an inch deep. With the head of a large pin, a careful parent may often remove it. Caution must be used, however, in regard to the head of the pin; for it would be a serious evil to leave that in the ear, in attempting to extricate something else. This reminds me, by the way, to enjoin it on mothers to discourage children from

passing the heads of pins into their ears — a trick which they sometimes contract.

A few drops of oil, — sweet oil, or the oil of almonds, is best, — dropped gently into the ear, will sometimes loosen the body which is lodged in it. Even if it should be a fly, or some other small living creature, it may drive him forth; for most insects hate sweet oil. There are cases, however, when surgical art becomes necessary in the case. The ear, when painful, should not be too long neglected; for epilepsy and other convulsive disorders have been known to come on from violent pain and inflammation of the ear.

Children strongly inclined to inflammation of this organ, from cold, may do well to place a little wool in the ear. It guards slightly against external cold, and if only worn in the winter, and removed gradually and cautiously at the approach of summer, can hardly do any mischief.

Incontinency of Urine.

This subject has been usually treated under a single head — that of diabetes. But there is an affection very common among children, which, though it resembles diabetes, is as different as any thing can be. I do not say it is entitled to the name of a

disease; but I have given it a name for the sake of convenience.

Many children acquire the habit of voiding their urine too frequently, on improper or unexpected occasions — a consequence of sheer neglect. Mothers and nurses should attend to their wants seasonably and habitually. Children may, at a very early period, be so managed as seldom to wet their clothes or their beds. That it costs some trouble I freely acknowledge; but it also costs trouble to be obliged to spend half one's time in drying clothes and beds from the time a child is born till he is twelve or fourteen years of age.

If those who have the care of children will early place them on a "chair," at such times as they suppose Nature is about to utter her demands, or might, with a little urgency, be made to utter them; and if, as soon as they have no further occasion for remaining there, they are taken away; it will not be long before the desire to attend to the calls of Nature will, by association, remind them of the place, and they will either go thither or manifest a desire to do so, and even wait a little while because they are not in the right place. This is no mere theory; there are many mothers who have tried and proved the plan I recommend, till it has become a successful and well-tried experiment, rather than a theory.

Again; if they are taken up as soon as they wake, and if their nap has been short, it will often be

found that there is an occasion for the "chair," and that, if the child is carried to it, the call will be obeyed. It is true the matter must be attended to the instant the child wakes, to insure success. I said if the nap were short; for it would be very unreasonable to expect little children to lie unattended to the whole of a long night. They should be taken up, after they are a year old, once in three hours or so; and till they are four or five, at least once a night. With this precaution, — I speak, here, again from experience, — there is no need of having the bed-clothes wet, nor of perpetuating a dirty and troublesome habit.

Diabetes.

In genuine diabetes, there is not only an incontinency of urinary fluid, but a remarkable change in its character and quantity. The quantity in twenty-four hours is often enormous, and a just statement of the case would not, by many, be believed. In some remarkable cases of adults, it has fallen but little, if any, short of two gallons in twenty-four hours. Its odor resembles that of milk, or more strictly, perhaps, fresh animal broths; it abounds largely in saccharine matter, or sugar; and its color is a pale straw color, approaching to green.

In children — for it is common to children and adults — it seldom makes its attacks till after the child has been weaned. After it has appeared, the subject of it not only loses the usual flow of spirits, but becomes languid, and begins to lose flesh, and the skin to become by degrees harsh, dry, flabby, and hot. At first the bowels seem unaffected, but these at length become disordered. There is, moreover, from the first, a most intense and sometimes distressing thirst. Finally, as too often happens, the brain becomes affected; headaches and vertigo come on; and the child dies stupid or apoplectic. Or, in other and more prolonged cases, the termination is in a remittent fever, followed by consumption or dropsy.

I have been thus particular in regard to the symptoms of this disease, not because mothers will very soon be able to manage it, but because it is usually beyond their reach, and, therefore, it is desirable they should be able to distinguish it from mere incontinency of urine, and govern themselves accordingly.

It may be well to allude to its supposed causes. These, according to Dr. Thomas and others, are strong diuretic medicines; intemperance in eating and drinking; *sensual indulgence;* severe evacuations; immoderate use of acid drinks; excessive labor, joined to a poor diet, especially when, with the latter, there was a free use of condiments; and what-

ever, in short, tends to debilitate or weaken either the mind or the body. Some of these causes are not likely to have place, of course, in infants; nevertheless, it is well the mother should read over the whole list.

When this disease has come on a little while previous to some important change of life, — such, for example, as puberty, — there is reason to hope that with this change it will disappear. But in general it does not pass away so easily.

The treatment of many children affected both with this disease and incontinency, is revolting to every sentiment or feeling of humanity. They are blamed for what is the effect of disease, and for what they can no more help than they can help having the headache, or a sick stomach, when the latter has been abused or overloaded. Better by far, and more humane, would nurses and mothers study the laws of habit in respect both to healthy and diseased action.

Mesenteric Fever.

Children of a scrofulous habit are often affected with a diseased state of the mesenteric glands, which, in a more advanced stage, is accompanied with fever, especially towards evening, and a deep-seated pain of the abdomen, with a gradual enlargement of the

latter, while the other parts of the body become emaciated. The face, especially the nose, becomes sharpened; the eyes glassy, and sunk in their sockets; the cheeks, (except when flushed with hectic fever,) and indeed the whole body, as white as marble; while the lips are swelled, and the corners of the mouth often ulcerated. When, along with an appetite generally good, but sometimes voracious, the above symptoms are found, and the child is fretful, peevish, and disinclined to motion, it is time to be apprehensive of danger.

In these circumstances, all which can be done to any purpose can be done by the mother. If there is force of constitution sufficient to enable the child to bear friction, use the warm bath, and exercise a good deal in the open air, we should never despair of a recovery. Exercise in the open air is almost every thing to the patient. Some have a great deal of confidence in bathing in sea-water, beginning with a temperature of 80°, gradually reducing it to 65°, or even in summer to 50°. A good deal of reliance is also placed on friction. At the same time, the diet should consist largely of dry, toasted bread, with a moderate allowance of sago, tapioca, arrow-root, and other mealy vegetables, and a very little milk.

This disease may attack children of every age, from a few months old to ten or twelve years. It is often greatly aggravated by worms.

Scurfiness of the Head.

Infants, while very young, are liable to a scurfiness of the head, which often proves very troublesome. It generally begins near the "opening of the head," as mothers and nurses call it, (that is, the anterior fontanelle,) and spreads in every direction, till it covers nearly the whole head. Sometimes it becomes quite thick and dark-colored, and, when rubbed, (for it causes a most intense itching,) falls off in large scales, or flakes, with a very offensive smell.

This disease, like many others which afflict infants, is often the result of neglect, and might easily be prevented by a due regard to cleanliness. Hence we can easily foresee what would be the first step towards a natural and healthy cure. This is, to wash the head, twice a day, in refined soap-suds, wiping it dry carefully, and avoiding thick caps. If the scurf do not come off readily by wiping and washing, use gentle friction with a brush.* It is highly important that the scurf should be removed; for otherwise no reasonable hope can be entertained of a cure; while, if removed, in nine cases in ten, the child will recover without any further measures being pursued.

* Or sometimes use a fine comb.

Eruptions.

I HAVE already treated of several sorts of eruptive diseases; but there remain to be mentioned ringworm, itch, pemphigus, and scurvy.

Ringworm, tetter, or herpes, — for all these names are given it in books, — takes on various forms. More generally, as seen among us, it consists of broad, itchy spots, on various parts of the skin, not unfrequently about the face. Having discharged, for a time, a thin, watery fluid, they gradually assume the form of extensive excoriations or ulcers; and finally scurfy scales appear, which peel off, and leave the surface underneath red, and liable to a renewal of the same course as before.

Some persons seem naturally inclined to these eruptions more than others; yet is there good reason for believing that they are aggravated, whenever and wherever they exist, by want of cleanliness, bad food, and damp or impure air. Ringworm does not seem to affect the general health much; and sometimes, when proper pains are taken to improve the health, it goes off, in time, of its own accord. The warm bath is particularly useful. I have little faith in the application of ink to eruptions; or, indeed, in any other external application. The cure must proceed from within, in order to be permanent.

Want of cleanliness is the first moving cause of

that troublesome disease, the *itch;* but, when once generated, it assumes an infectious shape, and may be communicated to others.

Need I attempt to prove that filthiness may cause the itch? It would not require a very elaborate argument to prove that several diseases, more malignant than this, are generated in that way. For to say nothing of syphilis, why is that dreadful complaint, the chimney-sweeper's cancer, peculiar to those who climb and sweep chimneys? Can we doubt that it is because of the accumulation of soot in the part which is so frequently the seat of the disease, and inseparable from their truly degrading and loathsome employment? Fortunate, indeed, is society, that the disease thus contracted is not contagious.

That the itch is infectious, many a mother knows to her sorrow; for it is generally, if not always, *at school* that the children of respectable and cleanly families become affected with it. Hence the exceeding great importance of preserving cleanliness, not only at home, but abroad. It is of comparatively little service to us to be cleanly in our persons, our apparel, and our habitations, if those with whom we are associated, as at school, are addicted to the contrary habit.

Quacks, generally, as well as some regular practitioners of medicine, recommend mercury, in one or another of its forms, — usually in the shape of an

ointment, — for the cure of this disease. No doubt mercury will cure it; but I do not believe it to be indispensably necessary. Besides, it very often lays the foundation of some other troublesome and obstinate, not to say dangerous, chronic complaint.

To those who are not in too great haste to be cured, the following method of cure may be recommended, — which is, indeed, so far as I know, the more common plan in the interior of our country. It was so, at least, a quarter of a century ago.

"Mix two ounces of flour of sulphur with four ounces of fresh hog's lard, and add to the mixture sixty drops of oil of lavender. The latter ingredient will nearly disguise the smell of the other two, and thus prevent offending those around us. Rub the mixture on the parts affected while standing or sitting before a good fire, every other night and morning, till a cure is effected."

The linen worn while we are using this mixture should be thoroughly washed and bleached before it is again used; and as for woollen clothes, it would probably be the wisest plan, when we are fairly cured, to burn them.

An eruption very much resembling the itch, says Dr. Thomas, is sometimes to be met with in infants at the breast, as well as in children who have cut all their first teeth. It usually begins about the arms and thighs, but spreads, soon afterwards, to other parts, and not unfrequently extends to the

head and feet. In some places, it appears in very small eruptions, like the points of pins, with watery heads; and, in others, with as large ones as peas; and sometimes in foul blotches, which, after breaking, form sores, with broad, ugly scabs. These die away, and similar ones show themselves successively, in other parts, sometimes for two or three months, leaving the skin of a dirty hue. The method of cure is substantially the same with that of the common itch.

Pemphigus consists in eruptions over every part of the body, internal as well as external, which gradually rise up into vesicles of about the size of a walnut, containing a yellow, serous fluid, — in some instances of an ichorous nature, — which again disappear in the course of three or four days. It is most apt to occur in the weak and emaciated, and greatly accelerates their destruction. I do not know that any thing can be done for it, except to keep the child as healthy as possible.

Authors speak of a species of *scurvy* which they say affects infants. It appears to be manifested by slight blotches, with scaly eruptions, on different parts of the body, and a looseness and sponginess of the gums. Sea-bathing, and a diet of farinaceous vegetable food and milk, are said to be the principal means of cure.

It should never be forgotten that it is far better for a child — in fact, for any person — to have erup-

tions and ulcers on the skin than on the vital organs, or even on the mucous membrane of the alimentary canal. Let it also be well understood that whatever really strengthens and invigorates the general system, or even any of the internal organs, is likely to benefit the local disease in the same proportion. This should encourage us to wait with patience for a spontaneous cure of the eruption, as long as we find the general health improving.

Infantile Fever.

Children are so liable to fever, when any thing ails them, that it will hardly be safe to attempt to make a distinction, *for popular use*, between the several forms of what is rather common, under various names, among children, but which is properly an infantile remittent bilious fever.* My main object here is to say that there is such a disease, and that most writers on children's diseases, in this country, take notice of it; and to add that Professor Ives, and some other medical men of great science and skill, regard it as having a very close connection with the state of the first passages, affording another striking lecture to mothers on the subject of diet

* Sometimes, on account of its obstinacy, it has been called "plague in the bowels."

and drink; especially as it usually comes on about the end of August, or in September, when so many causes conspire to debilitate the stomach and bowels, and to pave the way for some one of the forms of diseased action which are then so common.

One thing relative to this disease is a little remarkable. Children who have seemed to be on the brink of the grave from it, and perhaps, too, from the debilitating effects of medicine, have been so nearly given over as to be let alone, or almost let alone, for a few days, and yet have finally recovered. How little do we know of the powers of Nature to restore, even when crippled by our interference! and how great is our encouragement to trust disease, when there are no obstructions in her way, entirely to the hands of Nature!

Rachitis, or Rickets.

In the whole catalogue of infantile diseases, I know of none more obviously and generally occasioned by the errors or follies of parents or nurses, than that terrible one called the rickets. It is, however, for the most part, inherited from a long succession of ancestors, rather than from a single family or generation. There is little probability that the first pair, or their children, suffered in this way.

It is one of the most difficult things in the world to make people see the connection of causes and effects, unless the causes are merely at arm's length from them. If a thing does not produce immediate mischief or evil, they take for granted that it never will. So is it especially in relation to the causes which produce disease. Nor can we expect it to be otherwise, till the world can be taught the laws of health and disease, and of course the laws of the human frame, and its relations.

If we could bring out, and set in array, the tens of thousands of the miserable — often incurable — sufferers from this dreadful disease, which might be found even in our own United States, and, with a voice that could be heard to every corner of the land, tell parents that these, and many more tens of thousands, already gone to their graves, owed their deformity and their sufferings to the mismanagement of those to whom they were committed, while young and tender, to be brought up, — if it were possible, I say, to do all this, what good would it accomplish? Would one in ten — nay, would one in a hundred — believe? Or, if they heard and admitted it, how long would they remember it to any practical purpose?

This strange disease generally attacks children between the ages of nine months and two years, which naturally leads to the suspicion that it has a

connection with the errors of its nurse — a suspicion but too well founded, as we shall see presently.

Rickets is a disease not known in uncivilized countries, nor was it known even in the civilized world — at least it was not observed — till the seventeenth century. Dr. Buchan says, "It appeared first in England about the time when manufactures began to flourish, and still prevails most in towns where the inhabitants follow sedentary employments, by which means they neglect to take proper exercise themselves, or to give it to their children."

At the beginning of this disease, the child's flesh grows soft and flabby; its strength is diminished; it loses its wonted cheerfulness, looks more grave and composed than is natural for its age, and does not choose to be moved. The head and bowels become too large in proportion to the other parts; the face appears full, and the complexion florid. Afterwards, the bones begin to be affected, especially in the more soft and spongy parts. Hence the wrists and ankles become thicker than usual; the spine, or backbone, puts on an unnatural shape; the breast is likewise often deformed, and the bones of the arms and legs grow crooked. All these symptoms vary according to the violence of the disease. The pulse is generally quick, but feeble; the appetite and digestion for the most part bad; the teeth cut slowly, and with difficulty, and often decay and fall out prematurely

Rickety children generally have great acuteness of mind, and an understanding above their years.*

There is a form of disease which should be regarded as a species of rickets, which has obtained the name of *mollities ossium.* In its progress, the bones lose all their firmness, and either become so brittle as to break, if the least force is exerted, or, what is more common, so soft that they can be bent in almost any direction, without fracturing them. This form of disease is more fatal than mere rickets. There appears to be no known cure for it, nor have I heard of any case of recovery spontaneously.

One prominent cause of rickets may be gathered from what has been already said. Parents who are enfeebled in almost any way whatever, especially by bad physical habits or a sedentary life, are apt to have rickety children. They seem to transmit the disease either by transmitting a feeble or scrofulous constitution, or by furnishing them with bad food. "Mothers, of a weak, relaxed habit, who neglect exercise, and live upon a weak, watery diet, can neither be expected to bring forth strong and healthy children, nor be able to nurse them after they are brought forth. Accordingly we find that the children of such women generally die of rickets, scrofula, consumption, or such like diseases. The children of fathers who were at their birth in the decline of life, or subject

* See "Domestic Medicine," late edition, p. 434.

to gout, gravel, or other chronic diseases, or who have been afflicted with the venereal disease in their youth, are likewise quite liable to rickets."

Any disorder that weakens the constitution or relaxes the habit of children, as small-pox, measles, scarlet fever, whooping cough, teething, &c., disposes them to this disease. And in a child already predisposed to rickets, it is highly probable that the recurrence of any disease whatever tends to increase or develop the rachitic symptoms. For every disease has a tendency to weaken the constitution; or, to speak more correctly, the causes which produce every disease (the disease itself being only the sequel or last link in a chain of causes and effects) tend to impair the constitution, in a greater or less degree, and thus to prepare the system for those other diseases, to which it is still more strongly predisposed. The worst cases of rickets occur, says Professor Ives, in children born of parents who have suffered much from syphilis.

Another cause of rickets is the bad quality of the food which is taken after they are weaned. We have already seen that the mother's milk, in some circumstances, may induce mischief. But after weaning, any food which is poor, watery, tainted, or difficult of digestion, may produce the same effect. Thus, in the manufacturing towns of Great Britain, not only is the air bad, but the food. The flesh and fish — what little they obtain — is often of the

very worst quality; and their vegetables are, too often, of a quality no better.

A frequent cause of rickets is confined, impure, and, above all, damp air. A child who is predisposed to rickets should never, if possible to avoid it, be kept in a small, close room; and should be carried out into the free air as much as the circumstances will permit. But when to bad air is joined the gases and vapors of wet and dirty clothes, wet cradles, &c., the evil influence is doubled and tripled, both in strength and activity.

The common and free use of medicine, especially elixirs, cordials, and powders, — not excepting even laudanum and opium, — and all kinds of fermented and spirituous liquors, have a tendency, greater or less, to bring on rickets; probably because, like diseases, they weaken the constitution, or at least exhaust, prematurely, its vital energies.

Neglect of exercise and of personal cleanliness is a fruitful source of rickets. A child, says Buchan, should always be in motion, unless when asleep; for, if it is suffered to lie or sit, instead of being dandled or tossed about, it will not thrive.

Some infants, says Dr. Bradford, an English writer, are the victims of open persecution; being beaten whenever they cry, or whenever they do not fall asleep and continue so while the nurse is engaged in other occupations, or when circumstances occur to ruffle her temper. Under such violent and

merciless hands, many become cripples during their lives. There are also persons, who, though they do not beat children, yet, by shaking them violently, by threatening them with severe punishment, or by presenting some alarming object to their imagination, lay the foundation of fits, and of the most incurable maladies.

It is seldom understood, I believe, that either of the last-mentioned causes operate to produce rickets; and it is terrible to think how many otherwise good people indulge in practices so obviously injurious — this disease being out of the question. Yet so it is.

I wish to add one more to the list of causes which operate, if not to excite, at least to aggravate, the rickets. For though it usually begins its attacks before a child is two years old, yet he may live on, very little worse, for many years, and even, in the end, get better. The distorted bones, if the disease has proceeded so far, will not, it is true, resume their shape; but much may be done to repair and rebuild the broken-down constitution. Especially may this happen about the period of puberty. When, however, this period is succeeded by solitary vice, — an error into which the scrofulous, the rickety, and the consumptive, will be particularly liable to fall, — the rickety symptoms, though before abated, will return with double force, and, if the cause of excitement is continued, eventuate in the destruction of the patient. Nor do I know that, if the cause of ex-

citement is withdrawn, it will save the patient. I have seen one case of complete reformation, which gave the patient a respite of some six or eight years, but did not prevent his falling a victim at the comparatively early age of thirty-five.

The causes of rickets will point out, so plainly, the treatment, so far as a change of physical habits can do it, that I hardly need do it. I will only say that whatever debilitates the general system, or weakens the powers of digestion, should be avoided, and whatever gives general tone, and vigor, and digestive energy, should be adopted;* that a due regard should be paid to exercise, air, and temperature, and that the cold bath must be used once a day, — some medical men say twice, — whenever there is energy of the system enough to secure a reaction. There is a difference of opinion on this subject, among authors, I well know; but the whole difference has its origin in the single point which I have mentioned. Those who object to it make their objection on the ground that a reaction is not likely to be secured, and not from any fears of its effects when it can be borne. There can be no possible danger — there may be great and unmixed

* Buchan says, "The diet ought to be dry and nourishing, as good bread, &c., and that, if the child only nurses, and has a bad nurse, the latter should be at once exchanged." He objects to milk, but I think without good reason. Let it be used, however, in moderation, and let it be new and healthy.

good — from the use of cold sponging, or a cold shower bath, whenever it is followed by a glow of warmth and by an increase of bodily and mental activity; or whenever these last effects can be produced by the combined powers of bathing and friction. For particulars on this subject, I must once more refer the reader to my other works, especially the tract on "Cold Bathing," the "Young Mother," and the "Library of Health."

Gravel.

This is a disease of adults as well as children; but its frequency among the latter may render a brief description of it desirable; for as children at an early age are not able to tell us how they feel, we may otherwise be liable to mistake the symptoms for those of some other disease.

Gravel, in infants, is usually indicated by a frequent desire to evacuate the bladder; by great difficulty and pain in the act; by sickness at the stomach, the body being bent forward, and the hands pressed upon the lower part of the abdomen; with restlessness, violent fits of crying, and some fever. There is also a sandy *deposition*, and sometimes an adhesion of slimy mucus to the vessel.

As to medical treatment, if any thing is to be

done, it must be done by somebody else besides the mother; except that she may do some good by substituting a solution of gum arabic, in part, for the child's usual food, if at the breast; and if not, by requiring him to drink the gum arabic, by itself, or mixed with some other weak tea, such as an infusion of spice bush or elder blossoms.

Difficulty of Breathing.

It is common for mothers to say of certain children predisposed to consumption, or at least to scrofula, that they are troubled with the *phthisic*. In books, such an affection is denominated dyspnœa, or simply a difficulty of breathing.

Some children are, at times, greatly distressed by dyspnœa; and parents are not unfrequently alarmed at the symptoms, thinking them about to die. In general, however, the fit soon terminates. A favorite remedy, with many mothers, is animal oil of some sort; and not a few have a strong predilection for that of particular animals, as the skunk, the goose, or the ox. It is very questionable, however, whether the oil serves much purpose, except to "while away" the time, until Nature relieves herself. Or, if otherwise, it is very questionable whether the momentary benefit derived from the

oil is more than enough to compensate for the re moter derangement done to the organs of digestion. For those mothers who use these substances are almost always dosing; and it would be as curious an inquiry as it would be fruitless, how many more attacks of the disease they cure, than they make. For myself, I have no doubt that those mothers who perform so many wonderful cures, are the cause of many more disorders than they remove.

The best prescription, in the cases to which I allude, is patience and a persevering regard to the laws of health. Children who are let alone usually either outgrow the disease or finally perish with one which is far more severe. In the former case, medicine would be of little or no service; in the latter, experience does not declare very much in its favor.

Volvulus.

This is one of the most terrible of the whole catalogue of infantile diseases, since it is not only distressing in the highest degree while it lasts, but often fatal. Our only hope with respect to it, or almost so, is in prevention.

By volvulus is meant the involving, as it were, of one portion of bowel within another; in other words, one portion or piece of bowel falls into another, and

the latter contracts upon it, and thus closes up the passage. Of course, the involution must always take place in a downward direction.

There are usually reckoned two kinds of volvulus — that of the large intestine, and that of the small; but I am not sure the distinction will be of any practical importance to mothers.

In the volvulus of the small intestine, the stomach sympathizes so strongly in the spasms or constrictions of the intestine, as to produce an almost constant vomiting. There are also frequent evacuations of a small quantity of mucus, with flakes of blood in it, and considerable tenesmus. In the volvulus of the large intestine, there will be much less vomiting, and the bowels will be more torpid. There will be a rumbling noise in the body, which can be distinctly heard. It will seem to proceed to a certain point in the abdomen, and then suddenly stop.

Among the most prominent causes of volvulus are those which act upon the system in such a way as greatly to debilitate it; for whatever debilitates the body debilitates also the intestines, and exposes them to disease. Cold or damp applied to the body; cold, acrid, or indigestible substances taken into the stomach; worms, and sometimes acrid or poisonous medicines, especially purgatives, — are likewise among the more common provocatives.

Nature often effects a cure in this disease; otherwise the sufferer may be expected soon to sink.

Happily, however, the disorder is not of very frequent occurrence.

Rheumatism.

Infantile Rheumatism generally attacks the lower extremities, inducing pain and afterward heat. The bowels are also at the same time somewhat affected, and their secretions altered. Attacks of this complaint are preceded, always, by cold extremities.

The disease is not, in general, one of much danger. If let alone, and the general habits of the child are attended to, it will usually pass off in a little while. There are cases, however, which are more severe and dangerous, and which have been known to cause death in three or four days.

To what habits the child should be trained, with a view to prevent this disease, when a predisposition to it is discovered, may be gathered from what has been said in connection with other diseases. Whatever tends to give tone to the whole system, especially to the first passages, as pure air, good exercise, a proper degree of warmth, unstimulating food and drink, and a quiet mind, will be the most effectual means of defending the system from the attacks of rheumatism.

Whitlow.

Whitlow is the name given to a disease which sometimes falls upon the extremities of the fingers, and is the cause of a great deal of suffering. It usually terminates in suppuration.

There are commonly reckoned four kinds of whitlow. The first fixes itself at the root of the nail, and seldom goes any deeper. This is the mildest form. A second, more severe, usually attacks the extremity of the finger, penetrating below the skin, and continuing troublesome a long time. The third sort is situated under the sheath which covers the tendons of the fingers. It is very deep and painful, and the inflammation and pain extend as far as the wrist. In the fourth kind, the inflammation begins near the bone, in the periosteum, as it is called, which covers it, and even, in some instances, affects the bone itself. In the two last species, there is often considerable general fever.

Whitlow is occasionally caused by punctures, or other apparently slight injuries. Dr. Dewees says it is sometimes brought on by a wound from a bone, or the fin of a fish. In many instances, the cause is not obvious.

The only treatment worthy of recommendation in ordinary cases — short of those which demand surgical aid — is the application of a warm wheat

bread and milk poultice; but, in order to derive much benefit from warm poultices, they must be continued warm. If not changed as fast as they become dry, they will not retain the heat, and will scarcely be better than no application at all.

Spinal Diseases.

There is a curious disease, occasionally seen, called *spina bifida*, or, in plainer language, *divided spine*. It is manifested by a tumor upon new-born children, at the lower part of the spine, at first of a dark-blue color, but afterward, as it increases in size, becoming more and more the color of the skin, till it finally becomes as clear and transparent, almost, as crystal. From its surface there is said to exude, very slowly, a clear, watery liquor.

The disease is always attended with a weakness — sometimes, in fact, amounting to palsy — of the lower extremities, and, in general, proves early fatal. One child is mentioned, by authors, who lived in this condition till eight years of age, and, surprising as it was, seemed to enjoy tolerable health, except that he was pale, and so weak that his legs could scarcely support him.

There is a strong propensity, among the ignorant and unthinking, to open these tumors; but the op-

eration is, I believe, always fatal. It is not easy to describe the state of the spinal marrow and brain, as it appears in this disease, when dissections are made after death. Nor is there any thing to be done to prevent or cure it. I should not have mentioned it, except to put mothers on their guard, not to open the tumor, should it be found in their children, but leave it to the skilful surgeon, or to nature.

Having said that nothing can be done to prevent this disease, I should be unfaithful to the trust reposed in me, were I not to state that such derangements are, in all probability, always the fruit of physical transgression in some of the progenitors, and were I not to warn all parents to beware of a course that may involve their posterity in a condition so dreadful as that of suffering from spina bifida.

Dr. Darwin mentions, as a disease, what he calls a *protuberant* spine. It consists in the enlargement of one of the pieces which go to form the spinal column, and its elevation beyond or above the rest. The enlargement compresses the spinal marrow, and causes paralysis of the lower extremities, and is, in other respects, exceedingly troublesome.

My principal aim, however, in the insertion of an article on spinal diseases, was to speak of distortions. For nothing is more common, in these days, than to see this beautiful column — this main pillar, or post, in the human frame — removed more or less, at

least in some of its portions, from that erect position in which the divine Architect placed it.

It has been said by eminent surgeons, — I believe, in one instance, by Dr. Warren, of Boston, — that they seldom see a female over twelve or fourteen years of age, who has not one of her shoulders lower than the other. But this depression of one of the shoulders always presupposes a curve in the spinal column; for otherwise it could not happen.

But is it, indeed, so, — that a majority of the female sex have the spinal column more or less distorted? What, then, are the causes of so singular a result? For, as a general rule, both sexes are born with straight spines, and even, square shoulders.

The causes referred to are numerous; but I shall mention a few only, and those the more prominent ones.

1. A general scrofulous or rickety habit. It would not be difficult to show that a very large proportion of females, especially in large towns and cities, are more or less scrofulous, or, at least, so far of a cachectic habit, as it is termed by medical men, that their bones are softer than is natural, and are, of course, more easily bent out of their natural position.

2. Sitting too long on hard benches, some of them without backs, as in our primary and common school-rooms. I believe that thousands of girls, and not a few of the other sex, have their spines more or

less distorted, and otherwise injured, by such vile tyranny as that to which I here allude, and which, in a Christian community, ought not to exist.

3. Sitting in a particular position — not a straight one — much too long, as many young people do, not only at the writing desk, but at sewing, and various mechanical employments, has the same unhappy tendency with sitting on hard forms. True, the subjects of this kind of tyranny are a little older than the former. But are they not still *human?* Let us, then, treat them like human beings, and teach them to treat themselves so.

4. Another thing should be mentioned, which I am persuaded has its effects. I mean too tight a dress, applied to the chest. For, to say nothing about deformity of the bones of the chest, and the consequent injury of the lungs, and, indeed, of most other parts of the body, the spine is especially inconvenienced — to use a term no more severe — by the encumbrance. I believe the inconvenience and uneasiness are one cause, indirectly, of distortion of the spine. They certainly prevent that free motion of the spinal column which it ought to have. And who does not know that want of motion in a part — especially while numerous causes are already in operation to produce disease in it — must inevitably add to the general trouble?

But I must not descend to particulars; I have not room for them. A few words, only, will be added,

in regard to prevention and cure. And first, of *prevention.*

Now, it is sufficient to say that more of recreation and moderate labor, and less sitting on hard benches, or in any one position, are the first things to be secured as preventives of crooked spine. Cold bathing, plain food, freedom of dress, and all other measures which are calculated to invigorate, generally, the system, should also be parts of the same prescription. Those who require a larger number of particulars, will find little difficulty of gleaning them up under the various heads of this volume, or, indeed, from most other writers on health and medicine.

What I have to say on the subject of cure will be still more brief. There are surgeons who have some success in treating spinal distortion. Be cautious in the selection of your man; but, having made the selection, place yourself, without reserve, under his care.

Neuralgia.

Neuralgia is a name which, within a few years, has been applied to certain painful affections of the nervous system, or, rather, of particular portions of that system. When the pain is in the face, — a very

common form in which it appears, — the disease has usually been called *tic douloureux*. But there may be neuralgia of the nerves of the eye, the thumbs and fingers, the breast, the knee, the heel, the toes, &c.

The pain, in neuralgia, is exceedingly severe, and sometimes sharp. It comes on suddenly, and, after continuing a while, goes off, and leaves the sufferer almost well for a longer or a shorter time, when it again recurs. Sometimes the paroxysms are strictly periodical, recurring once a week, once in two weeks, or in some regular time. In other instances, they are more irregular in this particular.

In the severer cases of this disease, the pain seems to be not only intense, but to dart like lightning along the course of the nerves which are affected; and, in a few instances, the attacks are "so extremely agonizing as to cause a temporary loss of reason and consciousness." * In no case which I have seen, however, has there been any thing bordering at all upon insanity. In general, there is much soreness of the part, after the paroxysm; though sometimes a little tenderness is all which remains.

Now, there is an affection in children and adults, which, for want of a better name and place, — since, too, people will have names to diseases, — I have

* Eberle's "Practice of Medicine," vol. ii. p. 181.

preferred to range under the head of neuralgia. I have, however, great reason for believing it to be connected, in most cases, with a scrofulous constitution.

This affection appears in the earliest infancy, continues through the whole period of childhood and youth, and often extends into manhood. It seems, like the gout and consumption, to be hereditary in certain families, and to be entailed, for the most part, on the feeble members of those families, particularly on those which have the most distinct marks of a cachectic habit. I have traced it back to the fifth generation, and have learned that even then it was no new acquaintance.

It affects, most commonly, the knee, though sometimes the elbow, the wrist, or the ankle; and, in a few instances, it passes suddenly from one limb to the other. It is most apt to come on towards evening, and to recur in paroxysms of from ten to twenty minutes' duration, once in from one to two hours, through the whole night, or nearly the whole night, and to disappear in the morning. Occasionally, however, it begins in the daytime. It has been also known to depart so far from its usual course, as to continue for two or three days. But, when the season of its recurrence is fairly over, the sufferer appears to be about as well as usual, till another season of suffering recurs.

When an attack has come on just at evening, and the paroxysms begin to recur say once an hour, they are apt to continue through the whole *season*, as I have called it, at the same distance from each other; though there are exceptions even to this rule.

So far as I have observed, in all the numerous branches of the families in which I have seen this disease, it is most apt to come on at the close of a day of peculiar excitement. Great fatigue of body, alone, does not seem to induce it; though chills of the lower extremities sometimes do. Fatigue of body, however, does sometimes appear to *add* to the violence of the paroxysms, when other causes have brought it on.

Whatever may be the true character or cause of the disease, I am persuaded nothing can be done to mitigate the sufferings, or cure it, by medicine. Judicious physicians have exhausted their skill upon it in vain; and I believe such ever will be the result of purely medical effort. All which can be profitably done, during the paroxysms of a particular season, is to rub the part with flannel, or with a brush, not too hard, and to arm one's self with patience. More may be done during the long intervals of freedom from the disease, by hardening the constitution; though I strongly suspect that no individual, born with this affection, will get wholly free from it during his own life. He may, I believe, mitigate its severity; but he will be able to do more

for the generation which is to succeed him, than for himself.

One thing, I am confident, has a tendency of this sort. It is to *employ the muscular system as much as possible.* I mean, by this, to follow, not a sedentary life, or a studious one, but a life of great activity; as much activity as the strength of the system, taken as a whole, is equal to. Females, for example, who are afflicted with the complaint, should be educated to household employments blended with horticultural; and males to employments still more active, such as farming, carpentry, &c.

I have classed this affection with neuralgia, rather than with gout, rheumatism, or scrofula, more in reference to two things which have been named, than all the rest. The fact that the paroxysms are induced by mental excitement, is a strong one; but, when we add to this the conclusion, which has been forced upon my own mind, of the necessity of expending a great deal of muscular or voluntary power to keep down the disease, and the entire, or almost entire, immunity from the least signs of inflammation, local or general, the conviction of its purely nervous character is irresistible.

Diseases of the Teeth.

The tendency to early decay, in the first set of teeth, and the necessity of employing a family dentist, have been mentioned in treating of teething. A few additional thoughts on toothache in general — its causes and cure — will be necessary; for toothache is a disease in which children sometimes largely participate.

What, then, is to be done for the toothache? Shall the offending, or rather suffering, member be expelled? Or is there a more excellent way?

Now, if you have a dentist at hand whom you can trust, I would, as I have before said, leave all to him; but if not, I would do the best, as a parent, — as *one* parent rather, — in my power. I would inquire, in the first place, into the causes.

These may be neuralgia, rheumatism, cold, or caries; or there may be a sympathy with some other part, as with the stomach. Some people have toothache in connection with a weakened or diseased stomach, as from overloading or otherwise injuring it.

Neuralgia is not so common a cause of toothache as cold, rheumatism, or caries. It frequently happens, however, that several of the causes above enumerated act in concert; and then the suffering will not only be great, but difficult of removal.

When the tooth is really carious, with only a small opening, it is sometimes useful to fill it with gold, according to the modern custom of dentists. I speak here, of course, with regard to the second or permanent set of teeth only; for the first are not worth filling. When they are too far gone to render filling or plugging of any considerable service, it is better to have them at once extracted; and the sooner — after such decision — the better.

There are, abroad, a thousand toothache remedies — powders, drops, &c.; but they are not worthy of being trusted. The severity of the pain may, indeed, for a short time, be mitigated by any thing which excites a free flow of saliva, especially if there is more or less of local inflammation. But I cannot help thinking that the general loss to the system, from such excitement of the salivary glands, is so great as to render it hardly worth our while to induce it.

Much has been said about destroying the nerve — where the tooth is hollow — by cautery, or by keen acids. I have sometimes pressed a drop or two of the most powerful sulphuric acid, through a quill, upon the naked extremity of the nerve of a hollow tooth, with apparent success. But I do not recommend the plan; for there is danger of injuring the sound teeth or gums with the acid; besides, I am not quite sure the relief which is procured by destroying the extremity of the nerve will be permanent.

I ought here to add an earnest exhortation to

parents to study the anatomy and physiology of the teeth. Those who do so will discover the necessity of teaching their children to keep them clean, and to avoid breaking the enamel by picking them with pins, cracking nuts, &c. A little parental knowledge on this subject, and a little care along with that knowledge, would save us not only expense, but a great deal of suffering.

Short-Sightedness.

Amid the blessings of a high state of civilization we have a few evils intermingled; of which myopia, or short-sightedness, is one. Nothing strikes me more than the obvious and certain increase, every where, of this diseased state of the organ of vision. I do not hesitate to affirm that, whatever may be the specific cause or causes, there are ten cases of short-sightedness in New England now, for one which existed one hundred years ago; and, unless I am much mistaken, the number is every year increasing.

I have alluded to the causes. They are, I have no doubt, many and various; some of them beyond the power of the sufferer to remove, as the near-sightedness is frequently born with him. Facts compel me to the belief, that the cause of defect,

whatever it may be, has a pretty close connection with the state of the nerves and the nervous system; and that, whatever has a tendency to debilitate the latter, predisposes to the former.

The usual prescription of medical men for the disease, when it has actually arisen, is, I believe, the wearing of concave spectacles. This, however, is at best a painful necessity, since it is but a choice of evils. Early and continued dependence on glasses has a general and inevitable tendency to weaken the eye, and increase the difficulty. It may be a happy resort — I know it is so — for the present; but I doubt, very much, its usefulness in the end.

Strabismus, or Squinting.

The modern custom of dividing the muscles of the eye in cases of strabismus, in proportion to its successfulness, may lead mothers, as I fear, to neglect, even more than formerly, the causes which lead to it. Should it be so, it is a result very much to be regretted; for they are, almost always, within the pale of maternal influence and control.

Some of these causes have already been mentioned. In addition to what has been said, however, I wish to add one cause more, which I believe to be of frequent occurrence — the habit of sucking the

thumb. Many a child, as I am fully convinced, has acquired a habit of squinting in this way. While sucking the thumb, they are apt to look at the fingers of the same hand; but these are so near the eye, that the latter is obliged to look crosswise to see them; and this, ere we are aware, induces a habit. If the constitution is firm, the effect will be less visible, and seldom permanent; but if otherwise, the impression may last through life.

Dr. Buchan tells us children sometimes learn to squint by imitating a squinting nurse or playfellow. I have observed the children of a squinting mother often to resemble her, but have been at a loss on what principle to account for it. Perhaps Dr. B. may be right. Children are certainly imitative beings. It will always be well to remove every cause of this sort, as far as we can, even if we are obliged to change the nurse, or the companions, or playmates. Where the squinting nurse, however, is the mother, and the companion a brother or sister, the cause is not so easily got rid of.

How much there is, in physical education, for mothers to do! The contemplation of disease, at every step, seems to elevate and exalt their duties, their power, their prerogatives, their responsibilities. When, O when, shall they be educated as they ought and deserve to be — nay, more, as the welfare of man, for time and for eternity, demands?

Sleep-Walking.

It is not my intention to enter, here, upon the philosophy of sleep-walking, or, in the language of books, *somnambulism;* nor is it necessary in a volume for mothers. But sleep-walking *exists*, and, where it exists, is a disease, or, at least, the effect of disease. What, then, are its causes, and how shall they be prevented from operating? Or rather — since the causes would often suggest the cure — what is to be done by parents whose misfortune it is to have sleep-walking children?

Dr. Darwin, in his usual short-hand manner, says, give opium in large doses. Now, this will prevent the disease, for the time, no doubt. But who is willing to be obliged to continue the use of this pernicious drug night after night, till it produces other serious or alarming diseases? No one pretends, I believe, that it will cure permanently.

There are a thousand popular remedies for somnambulism; but the most popular, though, at the same time, the most objectionable, is that of dashing a bucket of cold water on the unprotected body of the poor sufferer. I wonder why the temporary fright thus induced — temporary though it is — has not oftener injured the brains of children than appears to have been the case; especially as the disease is one which

falls to the lot of children whose nervous systems are not, as a general rule, well prepared to endure the united influence of the fright and the chill. But "mankind are tough," as an aged physician used to say; and it is well that, in the good Providence of God, they are so, or they would be oftener destroyed by our errors than they now are.

It can never be wise to do that which will agitate the nerves, or increase debility, by way of endeavoring to quiet the one, or remove the other. Better, if we can, to remove every source of disquietude during the day; and to secure, in the daily habits of a sleep-walking child, every thing which shall have a tendency to invigorate and harden. Especially should there be quiet at evening, and, above all, an unoffending supper. I am quite confident that heavy or excessive suppers, especially when they are eaten at the close of a day of excessive labor and great or protracted heat, and followed immediately by repose and sleep, have been the means of many a jaunt abroad, and of some broken bones. This disease of somnambulism has more to do with the state of the stomach, occasional or habitual, than most people suppose.

Hip Disease.

This is a terrible disease in its consequences to children, whom it often injures for life; and one of the greatest evils connected with it is the insidious manner in which it comes on. For it is not till the disease has existed for some time, that it is usually observed.

At first, the child complains of a weakness in one of the limbs; or, perhaps, long before he utters any complaint, he is observed to favor that limb more than the other. It is not only more readily fatigued than the other, but it is apt to be pained by exercise, and to give way, so as to cause a fall, at every little obstruction. Still, however, the subject of the disease is not apt to complain; like other boys, he is urged on by the natural buoyancy of his feelings. Even when it is discovered — as sooner or later it must be — that the toes turn inward or outward more than they ought, parents and friends are apt still to deceive themselves in regard to the danger.

When, however, along with weakness of the limb, a change of position in the toes is perceived, let parents beware. Let them compare the length of the two limbs, and if the weak one is the longest, this will afford new ground of suspicion. The shape of the hip should next be observed; for it is apt to lose its natural roundness. The child, moreover,

is found to halt in walking; and when he stands, to rest frequently on the opposite limb. If he complains, at the same time, of pain in the knee, while yet the knee appears to be sound, but the hip tender, this will add to the indications of danger.

Another thing is to be considered. Hip disease, whatever may be the predisposition from inheritance or otherwise, is almost always preceded by some injury to the part, greater or smaller. Children have a multitude of falls on the ice, or the floor, or the ground, from fences, &c. &c. In fact, they are so liable to injury in their sports, that the wonder is, not that they are sometimes made cripples for life, but that they are not oftener made so. When, therefore, the symptoms mentioned in the preceding paragraph are discovered, let inquiry at once be made, whether they have, at any time within their recollection, bruised or wrenched the hip.

I have been the more particular on this point, because, whatever is done in this disease, is to be done early. The child must be submitted, at once, to the most skilful surgeon that can be found. He may be able to do good by requiring entire abstinence from all exciting food and drink, and by confinement to a bed or mattress, till rest, and a low diet, have given the weakened joint opportunity to recover its tone.

It must not be concealed that the cure, if effected, is apt to be tedious. But the object is one of much

consequence; and who would not try to persevere? What though a child should be compelled to lie on his back from two to four or even six months; is not this better than to be lame for life?

According to the testimony of Drs. Physic and Dewees, however, the cure will not require so long a period, if begun early enough, and if the child can be kept perfectly still by night and by day, and restricted to a sufficiently low diet, which, Dr. Dewees insists, should not only exclude all animal food or broths, but must be of the least possible quantity, which is consistent with the healthy activity of all the vital organs.

If hip disease is not early cured by nature alone, or by nature aided by the mother or the surgeon, the disease will, finally, proceed to suppuration. "An abscess forms, which opens, and gives issue to an unhealthy pus; the bones at the bottom of the abscess become but too frequently carious; hectic fever ensues; and after suffering, of a longer or shorter duration, the patient dies exhausted by discharges and sufferings."

Chorea, or St. Vitus's Dance.

Chorea is not exclusively a disease of infancy or childhood, though it generally commences at this

early period. It is much more fatal when it commences late in life, than when it begins, as it now generally does, between the third and the fourteenth years. In the latter case, it not unfrequently comes on gradually, and if it does not bring on some other disease, more immediately dangerous than itself, continues through life. It is chiefly incident, like many other diseases, to persons of a weak constitution.

This singular disease shows itself by convulsive movements, generally confined to one side, and affecting chiefly the arm and leg; though I have known it extend to nearly every muscle of the body. When motion is attempted, the part, in endeavoring to obey the will, seems to act irregularly; and not unfrequently a muscle obeys, or attempts to obey, which should not, rendering the motion not merely convulsive, but also disorderly. Thus, in endeavoring to raise the hand to the mouth, it is lifted, perhaps with a jerk, to the shoulder or the breast; and, in attempting to place the foot on the ground, in a certain place, it is carried, by an irregular and convulsive motion, quite aside from the spot intended, or lifted, as more commonly happens, a great deal too high. It also, at times, occasions bursts of laughter, when no one would expect it, and when, perhaps, the patient himself did not intend it.

It is exceedingly unfortunate that this disease is so often mistaken by parents and friends for a mere eccentricity of habit or character; and still more

so, that, on account of the singularity of the movements, the patient should be exhibited to strangers, or, at least, noticed by them. For there is usually too much mental activity in such children already; and, instead of exciting the nerves or brain, we should endeavor to quiet the irritation of both.

There is some difference of opinion in regard both to the cause and nature of this disease. All, however, agree on one point, — that it may be occasioned by any thing which operates as a source of permanent irritation to body or mind. Among the former causes are teething, worms, acrid matter in the bowels, offensive smells, poisons, &c.; among the latter, the impulses of horror, fright, anger, a general weakness of the nerves, and, in a few instances, mere sympathy.

A child affected with chorea should be early secluded, as much as possible, from society, and kept quiet. A sad mistake is made by parents, who, not understanding the nature of the case, send such children to school. And yet I have occasionally known it done.

But quiet, *mere* quiet, is not enough. The child should be kept *cheerful* as well as tranquil; nor should he be denied exercise or pure air, for both are essential. The diet should be mild, yet nutritious. A coarse or meagre diet would add to the disease.

If a child can be kept quiet, and the disease held

so far in check as to become no worse till the age of puberty arrives, there is great reason to hope that, with a change of constitution, the disease will disappear. Unfortunately, however, certain *irregularities*, commencing at this period, too often increase it, and even sometimes originate it.

No reliance can be placed on medicine in this disease, unless it be the warm bath. I know what is said by a few authors; but I have very little faith in their reports. Still, physicians and medicine are always at hand, if we choose to try them.

Epilepsy, or Falling Sickness.

The epilepsy of infancy and childhood is not so terrible as that of manhood; and yet the epilepsy of early life too often becomes that of later years, by its continuance. This is the disease which has obtained the name, in some parts of the world, of *falling sickness.*

Epilepsy attacks persons who appear to be in perfect health, or at least in as good health as usual; though, in truth, every epileptic person has a constitution more or less enfeebled. There is, indeed, in some instances, a sensation which foretells the attack of the fit; especially the *aura epileptica.* This is described as the sensation of something

creeping from a remote part of one of the limbs towards the head; and when it arrives at the head, the person falls. But neither this nor any other warning is always given, especially in infancy and childhood. Very often, the attack is as sudden as the lightning, and the sufferer falls to the floor or ground, where he lies for some time in apparent, yet unconscious agony. The muscles of the sides of the face are alternately contracted and relaxed; he foams at the mouth, and sometimes is thrown from side to side, as if rocked violently in a cradle. Generally, however, he lies in a stupid or comatose state. Foaming at the mouth is, I believe, a universal symptom.

Among the causes of this disease, according to Professor Ives, are indigestible food, teething, and constipation. Though called, and justly, a nervous disease, it is thought to have its origin (for the most part at least, in infancy and childhood) in irritation, of some sort, of the first passages. It would seem, however, to require a peculiar constitution of the child; for substances which do not appear to hurt other children will bring on epilepsy in those who are strongly predisposed to it. What in one child would excite rickets, or scrofula, or diarrhœa, or chorea, in others appears to excite epilepsy.

In regard to the treatment of this disease, I have, as usual, but little to say. What cannot be done

between the fits cannot be done at all; for there is nothing to do, during the paroxysm, but to let the sufferer alone, taking care that he has a supply of pure air, and a good place to rest, when the fit passes off. And in this disease, more, perhaps, than in all others, parents will be desirous of medical counsel — not, as I should hope, to advise the use of medicine, even cathartics,* but to advise to a course which is better, viz., one which is calculated to give tone to the general system.

Dr. Cullen, after saying that epilepsy depends either on a plethoric state of the system, or upon a certain state of debility in it, (which last is, I believe, most common,) goes on to give the following general direction. And first he speaks of the disease when caused by plethora, or rather in regard to the best means of removing the *plethora*.

"It will be enough to say that it is chiefly to be done by a proper management of exercise and diet; and with respect to the latter, it is particularly to be observed, here, that an abstemious course has been frequently found to be the most certain means of curing epilepsy."

The means of correcting *debility*, he says, are —

* Professor Ives and others say that purgatives are useful in the epilepsy of childhood, while they are not so in that of adult life. Children are tenacious of life, we know, and will *bear* medicine for some time, as we have already seen; but does it *benefit* them?

"the person's being much in cool air; the frequent use of cold bathing; the use of exercise, adapted to the strength and habits of the person, and perhaps the use of astringent and tonic medicines."

Observe, here, if you please, how little reliance this father of medicine placed upon its efficacy, since he prefaces his only reference to it with a *perhaps*. "*Perhaps*," says he, "*the use of astringent and tonic medicines*," &c. And here we will leave him and the subject.

Marks at Birth.

Marks, as they are called, at birth, are of various forms, sizes, and colors. A perverted and misguided imagination has tortured the various discolorations of portions of the human surface, at birth, into a resemblance to fruits of various kinds, and even animate objects; and these are steadfastly believed by many to be caused by an imagination equally morbid and more mysterious in its effects.

I have inserted this brief article, not to encourage mothers to attempt to do any thing for their removal, but rather to dissuade them from it. It is certainly possible that there is something as a basis on which to build the theory of marks at birth, though a large proportion of the wiser sort of medical men seem to deny even thus much. But suppose there were;

nothing can be done, after they appear. There was a period when the mother could have done something at prevention by strengthening the whole system, physical and mental; for whatever removes debility, and gives tone to the whole system, diminishes the probability of the child's having what are called marks.

In any event, it were difficult to decide whether the practice among us, of indulging children to excess, at a very early period, in certain articles of food, drink, or medicine, under the idea of doing them good, is the more hurtful or ridiculous. Many a child has been made sick by these indulgences, as I know from the actual observation of facts; and not a few, as I fear, have been made either gluttons or drunkards, or both.

Hardening of the Cellular Tissue.

There is a disease described by Dr. Maunsell, under the name of induration of the cellular tissue, which is said to befall children shortly after birth, and which deserves, at least, a passing notice; though I have never seen it, and have no reason to believe it is of very frequent occurrence.

This disease, whenever it occurs, is exceedingly fatal. In a single hospital in Europe, there died,

between the years 1808 and 1811, no less than 576 children out of 643 who were attacked. Like many other infantile diseases, — I might say all, — it most frequently assails those who are born prematurely, or who are, from any other cause, enfeebled. It begins in the extremities, and for the most part in the feet. These become more or less swollen, dry, hard, and cold. Sometimes the skin retains its natural color; at others, it is livid or purple. It has the appearance of being stretched tightly over the parts beneath it, and is cold and hard, pitting readily upon the slightest pressure. From the extremities, the disease commonly proceeds, with rapidity, to the trunk of the body, parts or the whole of which are speedily affected in the same manner. The temperature of the parts affected is also very much exalted — appearing to be acted upon by external heat, nearly as if they were only so much dead matter. The child is restless, refuses its food, and whines continually, in a manner resembling, according to some writers, the crying of young mice. There is no appearance of fever.

This is, briefly, the description of a disease which will probably proceed three or four days, till breathing becomes difficult, and death closes the scene. In a few cases, however, the fatal termination has been delayed for two weeks or more.

The great loss of vital power in this disease — indicated by the coldness and passiveness of the

diseased parts — is very discouraging from the first; and maternal wisdom will probably fail in it; if, indeed, any earthly wisdom can be expected to avail. In the hands of medical men — prone as medical men are, and pressed as they are, to do *something* — friction, with warm flannel, an emetic of ipecacuanha, and internal stimulants, appear to be the only course of treatment which has met with any degree of success.

Bleeding at the Nose.

Many children of a sanguine or active temperament become early subject to the habit of bleeding at the nose; and in some instances the discharge becomes so frequent and so profuse as greatly to weaken the whole system; and if permitted to continue too long, may induce permanent injury to the constitution.

The conditions which expose to attacks of this complaint seem to be the following: 1. the active temperament of which I have spoken, this being accompanied by a proportionate activity of the circulatory system; 2. peculiar weakness in the blood-vessels which are formed in such numbers in the membrane lining the nose; 3. great heat, especially being *over*-heated; 4. too violent exercise; 5. blows

and falls, or other forms of external violence; 6. alcoholic and other stimulating substances; 7. exciting passions.

These causes of the disease are especially influential when two or more of them are combined, as an *active temperament*, *mental excitement*, and *great exertion* in a *hot day*. Thus a child, at his play in midsummer, is taken with epistaxis, or hemorrhage from the nose, because he has been exposed to the combined influence of four of its most fruitful causes.

What has been said cannot fail to point out the true method of treatment, which is, to remove the causes. Even when we cannot remove them all, we should, at least, do all in our power. We may often prevent the *combined influence* of several of them. Thus, if a child is of a sanguine temperament, though we may not, and should not, prevent his playing in the open air, we may, at least, prevent his playing violently in the great heat. We may hope, also, to suppress, in his case, the undue influence of exciting or improper passions.

I have seen young men, at hard labor in the hot days of summer, affected with epistaxis to an extent which greatly weakened them, and diminished their enjoyment, as well as their usefulness. Yet, strange to tell! these same young men, hardly as yet within their teens, were in the daily use of salted and high-seasoned food, and cider; and, at times, of liquors

still stronger. Ought such young men to expect to recover, permanently, from the troublesome affection of which they complain?

But is nothing to be done to check the bleeding, in any case? I shall, perhaps, be asked. Most certainly there is, in some circumstances; though by no means in all.

When a child bleeds to faintness, it is time, perhaps, to pay some attention to the hemorrhage. Indeed, the faintness itself will have a tendency to check it. But I would stop it short of faintness, if I could. This may easily be done. He may sit down in the cool air — of course not in a current — and water or ice may be applied to the temples, and to the sides and back part of the neck. Water, or something still colder, may also, by means of a sponge, be applied to the nose, and to other parts of the body which have the skin very thin, as the armpits, groins, inside of the arms, &c. It is seldom that the disease will long hold out against the influence of these simple but appropriate measures.

Polypus in the Nose.

Dr. Darwin speaks of polypus in the nose of children who are troubled with ascarides, as some-

what frequent, but says nothing of the treatment, which, of course, belongs to the surgeon. I have never seen any thing of the kind, nor do I recollect of any other author who mentions it. He speaks, in the same paragraph, of itching of the nose in this complaint — a common symptom, as every body knows, of ascarides, — whether there is, or is not, polypus.

Softening of the Stomach.

A NEW and very fatal disease has sprung up in Europe within the last ten years, which the physicians call *Gastro-malacia*, or a softening of the stomach. The infant is seized with great febrile heat, and with vomiting and purging of a serous and somewhat acid matter. The features shrivel, the eyes sink, and life goes out often in twenty-four hours. In a milder form, it may continue several weeks. I do not learn that any of those who are afflicted with it recover, or that any instance of it has, as yet, occurred in this country. As it will probably reach us, however, in due time, and as it more generally attacks children under the age of twelve months, it may be interesting to mothers to know that such a disease is in existence, and sometimes proves epidemic.

Pediculi.

This name is from Darwin's "Zoonomia," and is applied, for want of a better, to what Dr. Darwin has somewhat singularly classed as a disease. I say somewhat *singularly;* and yet I do not know why the existence of animals *within* the human body should give name to a disease any more than their existence *on the outside.*

The parasitic race, to which I allude, are sometimes, in infancy and childhood, exceedingly troublesome. What are the causes which produce them, is not, perhaps, very well known; though a more general belief is, that they have their origin in a want of cleanliness. One evidence of this is found in the well-known fact that, when they stray to the heads of cleanly, healthy children, they are not apt to increase in numbers, in their new residence.

The same fact also excites a suspicion that the state of a child's health has something to do in the case — a suspicion which would seem to be confirmed by a statement in a respectable French journal of last year, from a teacher, who, in speaking of the common belief that these forms of life originate in uncleanliness as not wholly correct, observes respecting his school — "We not unfrequently observe these vermin in scrofulous chil-

dren of the higher classes, who are invariably kept with the greatest nicety."

Need it be repeated, here, that the causes suggest the cure? and that, too, so obviously as to bring the treatment wholly within the province of the mother?

Wounds, Bruises, &c.

While I was but a mere youth, I happened to be present, one day, when a man came to a surgeon with a wounded foot. It seems it had been cut that morning with some sharp instrument, — perhaps an axe, — and had been bound up closely with an oily or greasy plaster. "Take away your ointments," said the surgeon, as soon as he saw the wound; "they will only hinder the cure. When you wound your flesh, if you will just bring the cut edges together, and keep them there, the cure is already half completed; nor do you want any greasy applications afterward."

This early lesson I never forgot; and at every subsequent step of my life in the study and practice of surgery, I found this leading principle continually verified. When the divided edges of a mere cut *could* be brought into contact, and kept there a few days, and the part kept pretty quiet, I found no other treatment necessary. It is, indeed, well to cover

the wound with a simple bandage of linen cloth, to defend its tender surfaces from being irritated by the clothing, or any thing else to which it might be exposed, but nothing more.

What, then, becomes of the thousand specifics which are found — as many, almost, as there are aged women and meddling men among us — for wounds of this sort? One would have every wound bound up in molasses; another with peach-leaves; another with basilicon ointment; another with balsam of life; another with tobacco juice; and so on. Are all these *certain cures* to be prohibited?

The truth is that, if a person is temperate and healthy at the time of receiving a wound, and continues so, and if the wound is treated by simply restoring the divided parts to their natural place, there will very soon be a union of the parts, by what surgeons call the *first intention;* and this *in spite* of any greasy or otherwise offensive applications, and not in *consequence* of them. The cure or healing always begins at the bottom of the wound, and gradually proceeds towards the surface. Applications which are irritating may, indeed, retard the cure a little, but it will generally proceed as fast as is consistent with the general good. But I repeat the principle that mothers may not forget it — *no external applications can, in any considerable degree, hasten the cure of a wound.* It is cured internally, if at all;

not externally. Nature is the physician, and not he or she who only attends to the outside.

Such I have stated to be the plain matter of fact in relation to simple wounds, whose edges can be brought easily into contact, and kept so. But the natural contraction of muscles tends to keep the edges apart; and what shall be done?

I have already said that a simple bandage may be useful on several accounts. Now, as soon as a wound is inflicted, and we are quite sure nothing is divided or very much wounded but simple *flesh*,* I would wrap it up snugly, and rather tightly, though not so tightly as to stop the circulation; and so wrap it that the bandage may bring the parts together, and keep them so. In this situation it should remain untouched for several days.

But if the wound is deep and large, and a bandage will not bring the parts together, it is customary to fasten the divided edges together by means of an adhesive plaster, usually called sticking plaster. Strips of cloth are made to adhere to the sound flesh on each side of the wound, and so placed that, on pulling them toward each other, they pass between each other like the interlocking of the fingers of the two opposite hands; and thus interlocked,

* We should be pretty certain, always, that there are no foreign substances remaining in a wound, as wood, stone, iron, glass, lead, dirt, bits of cloth, &c.

and the edges of the wound drawn together, they should be fastened.

Cases occur, it is true, in which the edges of the wound, by reason of their containing tendons or other parts which contract, must be fastened by sewing. This will be the case, above all, when such wounds are very much extended. But this sewing is the work of the surgeon.

Where a wound is deep, it will frequently happen that it will continue to discharge at the surface for some time. Perhaps it will be wholly healed except a very small part, — the lowest or most depending portion. Some are discouraged at this. But if a person is in perfect health, he should never be discouraged. The top will heal as soon as the inside is well cured; and I repeat that, if the top of a wound *could* be healed up sooner than the bottom, it would break out again.

In short, all we have to do, in case of a wound, is simply to aid nature as much as possibly we may; which, in general, however, is but very little. This, in truth, is all the surgeon can do, unless, indeed, owing to the general disposition to interfere, he has imposed upon him the burden of keeping other people from doing mischief.

Perhaps the brief exposition I have made of the true method of curing wounds — that is, nature's *own* method — will be applied by the reader to bruises and ulcers as well as wounds. It is exceedingly rare

that a bruise or ulcer requires any thing but to be let alone, — from mothers at the least. The common belief that one thing — one external application, I mean — is *drawing*, another, *cleansing*, &c., is unfounded. Nothing which is applied to the outside of the human body can, properly speaking, be said to draw. We might as well expect a plaster applied to the covering of a building, to draw, — and perhaps draw out a nail, — as that it should draw when applied to the surface of the living body.

Bruises sometimes, perhaps I should say frequently, prove more difficult of cure than simple wounds. But here, too, we must trust chiefly to nature. Even when we call on medical men for advice in case of bruises, ulcers, and wounds, the little they do is more to satisfy the expectations of the ignorant that *something will be done*, than because they expect what they do will be really and intrinsically useful.

Burns and Scalds.

If active treatment were necessary any where, it would seem to be so in the case of burns and scalds. And yet I have generally found that the less they are interfered with, the better. I speak here, however, of those smaller casualties of this sort to which

children are perpetually subject, and for which mothers are so apt to prescribe.

Every mother, of any age, and in fact almost every individual, has a supposed cure at hand for a burn. With one, it is sweet oil; with another, it is cotton; with another, camphor; and with another, turpentine. Yet there are cases — I have met with one or two such — where turpentine was a certain poison to the healthy skin, and where I was afraid to use it on the parts which were injured. And what a medical man would be unwilling to use on all sorts of persons, and every kind of burn, mothers might with reason be equally cautious about. The truth is, that a burn, where the skin — perhaps only a small part of it — is merely reddened, requires different treatment from one where the injury is extensive or deep. And in considering whether or not the injury is deep, we need to take into the account the agent by which it is inflicted. Simple water, for example, at boiling heat, is but little more than one third as hot as boiling oil; for while the former boils at 212° of Fahrenheit, the latter boils at about 600°.

The object of these remarks is not to point to any specifics, but to dissuade from their use, as much as possible. In general, external applications, even for burns and scalds, are of little service any further than to prevent or allay irritation. And the reason why so many sorts of treatment — some of them as diverse from each other as the four winds — *appear* to

succeed, is because our tenacity to life is such that we get well in spite of them. The sanitary tendencies of the human system are but little understood by the mass of the community — sometimes even by medical men themselves.

There is an excellent anecdote told of the Abbé Fontana, illustrative of the point to which I am now directing attention. He was surprised at the great variety in the medicine used in some northern country of Europe, through which he was travelling, for the bite of the viper — and all, apparently, with the same success. On inquiry, however, it turned out that the bite of this reptile was not mortal in a high northern climate, as it is in a tropical one, and that those who were bitten recovered without the application of any thing at all, as well as under all sorts of treatment.

I may seem to speak against every form of external application in every possible case; but it is not exactly so. Where the skin is unbroken, and the inflammation runs high, I would certainly reduce the heat by the application of water at such a temperature as should be agreeable — generally at a very low one. Where there are much irritation and pain, and the burn is deep, I would, as a general rule, mitigate the suffering by means of cloths moistened with sweet oil; or, what experience sometimes shows to be best, warm bread and milk poultices.

After all, it were better for every parent whose

child is severely burned, and who rejects the specifics which are offered him, to seek the guidance of those who, if they do any thing at all, will be more likely than the ignorant to adapt their treatment to the particular circumstances of the case before them.

Freezing.

Multitudes of individuals lose their limbs, if not their lives, every year, for want of a little common sense at hand to direct them. With ears, face, fingers, or toes, benumbed with cold, — perhaps frozen, — they rush at once to the fire, and thus complete, in a moment, that destruction which the frost had indeed begun, but which a little timely care might, at the least, have suspended.

"Every one knows," says Buchan, "that if frozen meat, fruits, or roots of any kind, be brought near the fire, or put into warm water, they will be destroyed by rottenness, or a kind of mortification; and that the only way to recover them is to immerse them, for some time, in very cold water. The same observation holds with regard to animals in this condition."

When the hands and feet are greatly benumbed with cold, or slightly frozen, they ought either to be immersed in cold water or rubbed with snow, till they

recover their natural warmth and sensibility. At first, the sufferer ought not to go near the fire, or even into a warm room. But, in a little while, he may be removed into an apartment which is slightly warmed, and at length into one warmer still. In a little while, he may be able to receive, with safety, a bit of toasted bread, if hungry; or, if thirsty, a little warm drink, as sage or balm tea.

I have elsewhere shown that chilblains are often formed by extreme cold, almost amounting to freezing, and by restoring warmth again too suddenly. Dr. Buchan thinks whitlows are often formed in the same way.

If the last twenty years of my life have been of any service to the world, I know not but they and I owe them to a kind Providence, which prevented my coming suddenly to the fire after being chilled almost to death, amid snow and ice. On coming to the shore, in a certain instance, I had just strength enough to reach a hut, so filled with smoke, that it was almost impossible to stay in it long enough to go to the fire, had there been much, — as, fortunately for me, there was not. In this situation, unpleasant as it was to me at the time, I gradually recovered my warmth, and subsequently my usual strength, and found myself comparatively uninjured.

Casualties.

In this closing chapter of the work, I propose to say a few words of swallowing improper or dangerous substances, of suffocation by bad gases, of apparent drowning, and of intoxication. If none but the last, like the subjects of two or three of the preceding articles, is entitled to the name of disease, still children are liable to most of them, in a greater degree than adults; and hence they should not be wholly overlooked.

Children are peculiarly liable to swallow substances which they should not; such as kernels of corn and grain, beans and peas, and sometimes nails, pins, and needles. I do not, indeed, suppose they often swallow the latter intentionally; but whether from intention or not, the practice is equally dangerous. The truth is, they should not be allowed to have them in their mouth, or, in fact, within their reach. For it sometimes happens that a worse misfortune befalls them than merely to swallow such things — they fall into the windpipe, the opening to which they have to cross in reaching the gullet or foodpipe beyond.

Who can avoid wondering when he considers how few accidents occur of either of the kinds referred to? For though Providence seems to have ordered it so, that the passage to the windpipe is

ordinarily closed while we swallow food or drink, yet if we talk, laugh, sneeze, or cough, while these last are passing over, there is very great danger indeed of their falling in. And as to the passage of substances to the gullet or foodpipe, there seems to be no obstruction at all but the humor or caprice of the child.

Parents should lessen the danger of both sorts as much as they can. They should not allow of talking during the time of eating or drinking; nor of having things in the mouth which are liable to stick in the throat; such as the stems, or skins, or stones, of fruits; the bones of fishes, and other small animals; small pieces of money, buttons, &c. How dangerous, for example, to give a child a whole peach, with the stone in it, or a piece of fish or fowl containing bones which he might swallow!

But substances are sometimes swallowed, — despite of our care. What, then, shall be done? Here I despair of giving any information, of which the mother, trained as she now is, can avail herself. Push down the substance, or extract it, according to circumstances, is a rule of no service, because the mother does not know how to discriminate. How does she know whether a particular child can swallow a peach-stone or a ninepence; or whether, on account of its size, it must be extracted? Will it not be well to seek professional aid?

Burning charcoal in our rooms, where there is no

flue, sometimes causes suffocation. This, however, is as often fatal to adults as to children, except that the latter often lie nearer the floor, and are therefore more readily immersed in the carbonic acid gas, which is heavier, by far, than common or atmospheric air.

When a child or an adult is discovered in this situation, the first and best thing to be done is to bring him into the open and pure air. Next, the lower half of his body may be placed in warm water. This will gain time, perhaps, to call for that advice and aid which are proffered by the medical profession.

Recovery from apparent drowning is greatly aided by wrapping in warm clothes, and placing warm things at the feet. After the lapse of a few moments, the body should be well rubbed with flannel cloths. Once it was customary to roll the body on a barrel; but this harsh treatment has justly fallen into disuse. Gentle treatment is more safe.

Intoxication is, perhaps, as truly a disease as cholera morbus; and yet it is not generally esteemed as such. But nowhere has the treatment of disease been more unfortunate — domestic or family treatment, I mean — than here. For, instead of being taken on horseback, or into a hard-going wagon, children, when, from any cause, they become intoxicated, should be laid on their side in an easy position, and kept as still as possible. The clothes

should be made loose, but the body should be kept warm. The warm bath has been commended by some, and may be useful; but I must honestly confess that I have never seen it useful among intoxicated children.

When it shall cease to be customary to keep any thing intoxicating in our houses, fewer children will become intoxicated from accident than formerly, and fewer even than at the present time. May we not hope that a period so much to be desired is not far distant?

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